THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL No. 2807 Session of 2002

INTRODUCED BY BROWNE, ADOLPH, M. BAKER, BARD, BASTIAN, BEBKO-JONES, BELARDI, BELFANTI, BENNINGHOFF, BIRMELIN, BISHOP, BOYES, BUNT, BUXTON, CALTAGIRONE, CAPPELLI, CAWLEY, CIVERA, CLYMER, M. COHEN, COLAFELLA, COLEMAN, CORNELL, CREIGHTON, CRUZ, CURRY, DAILEY, DALEY, DALLY, DeLUCA, DERMODY, DeWEESE, DIGIROLAMO, EACHUS, FLEAGLE, FORCIER, FRANKEL, FREEMAN, GABIG, GEIST, GEORGE, GODSHALL, GRUCELA, GRUITZA, HARHAI, HARHART, HENNESSEY, HERMAN, HORSEY, JAMES, JOSEPHS, KELLER, KENNEY, KIRKLAND, KREBS, LaGROTTA, LAUGHLIN, LAWLESS, LEDERER, LEH, LESCOVITZ, LEVDANSKY, LUCYK, MACKERETH, MAITLAND, MAJOR, MANDERINO, MANN, MARKOSEK, MARSICO, McGEEHAN, McNAUGHTON, MELIO, MICHLOVIC, S. MILLER, MUNDY, MYERS, NAILOR, O'BRIEN, OLIVER, PETRARCA, PHILLIPS, PICKETT, PISTELLA, PRESTON, READSHAW, ROEBUCK, ROONEY, ROSS, RUBLEY, SANTONI, SCAVELLO, SCHRODER, SCRIMENTI, SHANER, B. SMITH, STABACK, STEELMAN, STERN, STETLER, R. STEVENSON, T. STEVENSON, STRITTMATTER, STURLA, SURRA, E. Z. TAYLOR, J. TAYLOR, THOMAS, TIGUE, TRAVAGLIO, TRELLO, TURZAI, VEON, WALKO, WASHINGTON, WATSON, WILT, YOUNGBLOOD, YUDICHAK AND ZUG, JULY 15, 2002

REFERRED TO COMMITTEE ON HEALTH AND HUMAN SERVICES, JULY 15, 2002

AN ACT

- 1 Requiring disclosure by carriers of expense ratios in the
- 2 provision of treatment of alcohol and drug abuse and
- 3 addiction.
- 4 The General Assembly of the Commonwealth of Pennsylvania
- 5 hereby enacts as follows:
- 6 Section 1. Short title.
- This act shall be known and may be cited as the Expense Ratio
- 8 Disclosure Act.
- 9 Section 2. Definitions.

- 1 The following words and phrases when used in this act shall
- 2 have the meanings given to them in this section unless the
- 3 context clearly indicates otherwise:
- 4 "Behavioral health care services." Procedures or services
- 5 rendered by a health care program for the treatment of alcohol
- 6 or drug abuse and addiction or mental health services.
- 7 "Carrier." Any of the following:
- 8 (1) a health insurer;
- 9 (2) a nonprofit health service plan;
- 10 (3) a health maintenance organization;
- 11 (4) a preferred provider organization;
- 12 (5) a third party administrator; or
- 13 (6) any other entity that provides health benefit plans
- subject to regulation by the Commonwealth.
- 15 "Direct care expenses." The payment to an addiction
- 16 treatment program or mental health service for the provision of
- 17 services to a member.
- 18 "Direct payment." The payments that a carrier disburses to a
- 19 managed behavioral health care organization for the provision of
- 20 alcohol and drug abuse and addiction or mental health treatment
- 21 services for subscribers.
- 22 "Drug and alcohol abuse and addiction treatment expense
- 23 ratio." The ratio of the total direct care expenses incurred
- 24 for treatment service in relation to the total overall direct
- 25 payments for behavioral health care services.
- 26 "Managed behavioral health care organization." A company,
- 27 organization or subsidiary that:
- 28 (1) Contracts with a carrier to provide, undertake to
- 29 arrange or administer behavioral health care services to
- members.

- 1 (2) Otherwise makes behavioral health care services
- 2 available to members through contracts with health care
- 3 programs.
- 4 "Member." An individual entitled to behavioral health care
- 5 services from a carrier or a managed behavioral health care
- 6 organization under a policy or plan issued or delivered in this
- 7 Commonwealth or otherwise subject to regulation by the
- 8 Commonwealth. The term includes a subscriber.
- 9 "Treatment program." A facility licensed by the Department
- 10 of Health to provide for treatment of alcohol and drug abuse and
- 11 addiction.
- 12 Section 3. Distribution at time of enrollment.
- 13 A carrier that owns or contracts with a managed behavioral
- 14 health care organization shall distribute to its members at the
- 15 time of enrollment an explanation of all of the following:
- 16 (1) The specific alcohol and drug abuse and addiction
- 17 treatment services covered and the specific exclusions under
- 18 the member's contract.
- 19 (2) The reimbursement methodology that the carrier and
- 20 managed behavioral health care organization use to reimburse
- 21 addiction treatment programs for addiction treatment
- 22 services.
- 23 (3) The procedure that a member must utilize when
- 24 attempting to obtain behavioral health care services outside
- 25 the network of programs used by the carrier or managed
- 26 behavioral health care organization.
- 27 Section 4. Report to Department of Health.
- 28 Each carrier that provides behavioral health care services
- 29 through a company owned wholly or in part by the carrier or
- 30 through a contract with a managed behavioral health care

- 1 organization shall file a report on an annual basis with the
- 2 Insurance Department, the Department of Health, the Pennsylvania
- 3 Commission on Crime and Delinquency, the Public Health and
- 4 Welfare Committee of the Senate, the Health and Human Services
- 5 Committee of the House of Representatives and shall disclose the
- 6 drug and alcohol abuse and addiction treatment expense ratio for
- 7 the provision of this care to members.
- 8 Section 5. Effective date.
- 9 This act shall take effect January 1, 2003.