THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1823 Session of 2017

INTRODUCED BY MASSER, MILLARD, SCHLOSSBERG, TALLMAN, O'NEILL, A. HARRIS, GROVE, FARRY, HEFFLEY, WHEELAND, WATSON, WARD AND GABLER, SEPTEMBER 26, 2017

REFERRED TO COMMITTEE ON INSURANCE, SEPTEMBER 26, 2017

AN ACT

Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An 1 act relating to insurance; amending, revising, and 2 consolidating the law providing for the incorporation of 3 insurance companies, and the regulation, supervision, and protection of home and foreign insurance companies, Lloyds associations, reciprocal and inter-insurance exchanges, and fire insurance rating bureaus, and the regulation and 7 supervision of insurance carried by such companies, 8 associations, and exchanges, including insurance carried by the State Workmen's Insurance Fund; providing penalties; and 10 repealing existing laws," in casualty insurance, further 11 providing for billing. 12 13 The General Assembly of the Commonwealth of Pennsylvania hereby enacts as follows: 14 15 Section 1. Section 635.7 of the act of May 17, 1921 16 (P.L.682, No.284), known as The Insurance Company Law of 1921, added December 20, 2015 (P.L.461, No.84), is amended to read: 17 18 Section 635.7. Billing.--(a) When an EMS agency is dispatched by a public safety answering point as defined in 35 20 Pa.C.S. § 5302 (relating to definitions) or an EMS agency dispatch center under 35 Pa.C.S. § 8129(i) (relating to 21 emergency medical services agencies) for an emergency and 22

- 1 provides medically necessary emergency medical services, a
- 2 payment made by an insurer for a claim covered under and in
- 3 accordance with a health insurance policy for an emergency
- 4 medical service performed by the EMS agency during the call
- 5 shall be paid directly to the EMS agency.
- 6 [(b) An insurer must reimburse a nonnetwork EMS agency under
- 7 the following:
- 8 (1) The EMS agency has submitted a completed standardized
- 9 form to the department requesting nonnetwork direct
- 10 reimbursement from an insurer an EMS agency has identified. The
- 11 form must be submitted to the department annually by October 15.
- 12 The form shall declare the EMS agency's intention to receive
- 13 direct payment from an insurer identified on the form for the
- 14 next calendar year. The department shall develop a standardized
- 15 form, using an EMS agency's assigned license number, to be used
- 16 by an EMS agency that meets the conditions established under
- 17 this section. The department shall develop and maintain a
- 18 publicly accessible electronic registry that indicates which EMS
- 19 agency has requested nonnetwork direct reimbursement from an
- 20 insurer identified on the form.
- 21 (2) An EMS agency has provided notification to the insurer
- 22 upon submitting a claim for reimbursement that the EMS agency is
- 23 registered with the department to receive direct reimbursement
- 24 as provided for under this section.]
- 25 (c) An EMS agency may be subject to periodic audits by an
- 26 insurer to examine claims for direct reimbursement under this
- 27 section. If, through the audit, the insurer identifies an
- 28 improper payment, the insurer may deduct the improper payment
- 29 from future reimbursements.
- 30 [(d) Where an insurer has reimbursed a nonnetwork EMS agency

- 1 at the same rate it has established for a network EMS agency,
- 2 the EMS agency may not bill the insured directly or indirectly
- 3 or otherwise attempt to collect from the insured for the service
- 4 provided, except for a billing to recover a copayment,
- 5 coinsurance or deductible as specified in the health insurance
- 6 policy.
- 7 (e) An EMS agency that submits a form under this section may
- 8 solicit donations or memberships or conduct fundraising, except
- 9 that an EMS agency may not promise, suggest or infer to donors
- 10 that a donation will result in the donor not being billed
- 11 directly for any payment as provided under this section.
- 12 Notwithstanding this paragraph, an EMS agency may bill in
- 13 accordance with subsection (d). A violation of this section
- 14 shall be considered a violation of the act of December 17, 1968
- 15 (P.L.1224, No.387), known as the "Unfair Trade Practices and
- 16 Consumer Protection Law."]
- 17 (f) Claims paid under this section shall be subject to
- 18 section 2166.
- 19 (g) This section shall apply only to an EMS agency that is a
- 20 nonnetwork provider and provides emergency medical services,
- 21 unless preempted by Federal law.
- 22 (h) The following words and phrases when used in this
- 23 section shall have the meanings given to them in this subsection
- 24 unless the context clearly indicates otherwise:
- 25 ["Department." Department of Health of the Commonwealth.]
- "EMS agency." As defined in 35 Pa.C.S. § 8103 (relating to
- 27 definitions).
- "Emergency medical services." As defined in 35 Pa.C.S. §
- 29 8103 (relating to definitions).
- 30 "Insurer." As follows:

- 1 (1) An entity that is responsible for providing or paying
- 2 for all or part of the cost of emergency medical services
- 3 covered by an insurance policy, contract or plan. The term
- 4 includes an entity subject to:
- 5 (i) section 630, Article XXIV or any other provision of this
- 6 act;
- 7 (ii) the act of December 29, 1972 (P.L.1701, No.364), known
- 8 as the Health Maintenance Organization Act; or
- 9 (iii) 40 Pa.C.S. Ch. 61 (relating to hospital plan
- 10 corporations) or 63 (relating to professional health services
- 11 plan corporations).
- 12 (2) The term does not include an entity that is responsible
- 13 for providing or paying under an insurance policy, contract or
- 14 plan which meets any of the following:
- 15 (i) Is a homeowner's insurance policy.
- 16 (ii) Provides any of the following types of insurance:
- 17 (A) Accident only.
- 18 (B) Fixed indemnity.
- 19 (C) Limited benefit.
- 20 (D) Credit.
- 21 (E) Dental.
- 22 (F) Vision.
- 23 (G) Specified disease.
- 24 (H) Medicare supplement.
- 25 (I) Civilian Health and Medical Program of the Uniformed
- 26 Services (CHAMPUS) supplement.
- 27 (J) Long-term care.
- 28 (K) Disability income.
- 29 (L) Workers' compensation.
- 30 (M) Automobile medical payment insurance.

1 Section 2. This act shall take effect in 60 days.