

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 360 Session of 2015

INTRODUCED BY READSHAW, COHEN, KORTZ, KINSEY, KOTIK, MATZIE, BARRAR, METZGAR, HARKINS, HARHAI, TALLMAN, D. COSTA, MAHONEY, GOODMAN, FEE, GILLEN, O'NEILL, DEASY AND MURT, FEBRUARY 9, 2015

REFERRED TO COMMITTEE ON INSURANCE, FEBRUARY 9, 2015

AN ACT

1 Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An
 2 act relating to insurance; amending, revising, and
 3 consolidating the law providing for the incorporation of
 4 insurance companies, and the regulation, supervision, and
 5 protection of home and foreign insurance companies, Lloyds
 6 associations, reciprocal and inter-insurance exchanges, and
 7 fire insurance rating bureaus, and the regulation and
 8 supervision of insurance carried by such companies,
 9 associations, and exchanges, including insurance carried by
 10 the State Workmen's Insurance Fund; providing penalties; and
 11 repealing existing laws," prohibiting discrimination against
 12 volunteer ambulance services.

13 The General Assembly of the Commonwealth of Pennsylvania
 14 hereby enacts as follows:

15 Section 1. The act of May 17, 1921 (P.L.682, No.284), known
 16 as The Insurance Company Law of 1921, is amended by adding a
 17 section to read:

18 Section 635.7. Discrimination Against Volunteer Ambulance
 19 Services Prohibited.--(a) An insurer shall be required to
 20 contract with and to accept as a participating provider any
 21 willing provider of volunteer ambulance services. An insurer
 22 shall not discriminate against a provider of volunteer ambulance

1 services who agrees to accept negotiated payment levels and to
2 adhere to quality standards established by the insurer.

3 (b) Whenever a volunteer ambulance service is properly
4 dispatched by a public safety answering point as defined under
5 35 Pa.C.S. § 5302 (relating to definitions), any payment made by
6 an insurer for a claim covered under a health insurance policy
7 for a service performed by the volunteer ambulance service
8 during such call shall be paid directly to the volunteer
9 ambulance service, regardless of whether the ambulance service
10 is a participating provider with the insurer.

11 (c) The following shall apply:

12 (1) An insured may, through the assignment of benefits,
13 assign to a willing provider of volunteer ambulance services his
14 right to receive reimbursement for any service performed by a
15 volunteer ambulance service.

16 (2) A volunteer ambulance service provided an assignment of
17 benefits by an insured shall submit a copy of that assignment or
18 provide a notice of the assignment of benefits on a form and in
19 a manner prescribed by the department to the insurer with any
20 claim for payment for any ambulance service performed by the
21 volunteer ambulance service.

22 (3) The insurer, based upon the claim and notice of the
23 assignment of benefits submitted by the volunteer ambulance
24 service, shall remit payment of the claim directly to the
25 volunteer ambulance service within the time frame established by
26 this act for remitting payment on a claim and provide written
27 notice, within the same applicable time frame, of the payment to
28 the insured.

29 (4) If the insured executes an assignment of benefits and
30 the volunteer ambulance service submits notice of that

1 assignment of benefits with its claim for payment pursuant to
2 paragraph (2), but the insurer remits payment of the claim to
3 the insured, the claim shall not be considered paid. The insurer
4 shall, notwithstanding the incorrect payment of the claim to the
5 insured, remain liable for remitting payment of the claim to the
6 volunteer ambulance service pursuant to the assignment of
7 benefits.

8 (d) As used in this section:

9 (1) "Insurer" means an entity that is responsible for
10 providing or paying for all or part of the cost of ambulance
11 services covered by an insurance policy, contract or plan other
12 than a homeowner's insurance policy. An insurer includes an
13 entity subject to:

14 (i) This act.

15 (ii) The act of December 29, 1972 (P.L.1701, No.364), known
16 as the "Health Maintenance Organization Act."

17 (iii) 40 Pa.C.S. Ch. 61 (relating to hospital plan
18 corporations) or 63 (relating to professional health services
19 plan corporations).

20 For purposes of this definition, an "insurance policy, contract
21 or plan" does not include the following types of insurance or
22 any combination thereof: accident only, fixed indemnity, limited
23 benefit, credit, dental, vision, specified disease, Medicare
24 supplement, Civilian Health and Medical Program of the Uniformed
25 Services (CHAMPUS) supplement, long-term care or disability
26 income, workers' compensation or automobile medical payment
27 insurance.

28 (2) "Volunteer ambulance service" means any nonprofit
29 chartered corporation, association or organization located in
30 this Commonwealth, which is licensed by the Department of Health

1 and is not associated or affiliated with any hospital and which
2 is regularly engaged in the provision of emergency medical
3 services, including basic life support or advanced life support
4 services and the transportation of patients within this
5 Commonwealth.

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