

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 867 Session of
2009

INTRODUCED BY O'NEILL, DIGIROLAMO, BRIGGS, CLYMER, DENLINGER,
FLECK, GEIST, GERBER, GOODMAN, GROVE, GRUCELA, HARPER,
HENNESSEY, HESS, HUTCHINSON, KORTZ, MELIO, MILLER, MUSTIO,
PASHINSKI, QUIGLEY, QUINN, READSHAW, REICHLEY, SCAVELLO,
SIPTROTH, SONNEY, SWANGER, TALLMAN, TRUE, VEREB, VULAKOVICH,
BOYD, CREIGHTON, GINGRICH, RAPP, J. TAYLOR, MANDERINO,
HORNAMAN, MURT, YOUNGBLOOD, FARRY, M. KELLER, GRELL,
FABRIZIO, CAUSER, EVERETT, HOUGHTON AND METZGAR,
MARCH 11, 2009

AS REPORTED FROM COMMITTEE ON VETERANS AFFAIRS AND EMERGENCY
PREPAREDNESS, HOUSE OF REPRESENTATIVES, AS AMENDED, JUNE 1,
2009

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 635.4. Discrimination Against Volunteer Ambulance

1 Services Prohibited.--(a) An insurer shall be required to
2 contract with and to accept as a participating provider any
3 willing provider of volunteer ambulance services. An insurer
4 shall not discriminate against a provider of volunteer ambulance
5 services who agrees to accept negotiated payment levels and to
6 adhere to quality standards established by the insurer.

7 (b) Whenever a volunteer ambulance service is properly
8 dispatched by a public safety answering point as defined in the
9 act of July 9, 1990 (P.L.340, No.78), known as the "Public
10 Safety Emergency Telephone Act," any payment made by an insurer
11 for a claim covered under a health insurance policy for a
12 service performed by the volunteer ambulance service during such
13 call shall be paid directly to the volunteer ambulance service,
14 regardless of whether the ambulance service is a participating
15 provider with the insurer.

16 (c) The following shall apply:

17 (1) An insured may, through the assignment of benefits,
18 assign to a willing provider of volunteer ambulance services his
19 right to receive reimbursement for any service performed by a
20 volunteer ambulance service.

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

27 (3) The insurer, based upon the claim and notice of the
28 assignment of benefits submitted by the volunteer ambulance
29 service, shall remit payment of the claim directly to the
30 volunteer ambulance service within the time frame established by

this act for remitting payment on a claim and provide written notice, within the same applicable time frame, of the payment to the insured.

(4) If the insured executes an assignment of benefits and the volunteer ambulance service submits notice of that assignment of benefits with its claim for payment pursuant to paragraph (2), but the insurer remits payment of the claim to the insured, the claim shall not be considered paid. The insurer shall, notwithstanding the incorrect payment of the claim to the insured, remain liable for remitting payment of the claim to the volunteer ambulance service pursuant to the assignment of benefits.

(d) As used in this section:

(1) "Insurer" means an entity that is responsible for providing or paying for all or part of the cost of ambulance services covered by an insurance policy, contract or plan OTHER THAN A HOMEOWNER'S INSURANCE POLICY. An insurer includes an entity subject to:

(i) This act.

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

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

FOR PURPOSES OF THIS DEFINITION, AN "INSURANCE POLICY, CONTRACT OR PLAN" DOES NOT INCLUDE THE FOLLOWING TYPES OF INSURANCE OR ANY COMBINATION THEREOF: ACCIDENT ONLY, FIXED INDEMNITY, LIMITED BENEFIT, CREDIT, DENTAL, VISION, SPECIFIED DISEASE, MEDICARE SUPPLEMENT, CIVILIAN HEALTH AND MEDICAL PROGRAM OF THE UNIFORMED SERVICES (CHAMPUS) SUPPLEMENT, LONG-TERM CARE OR DISABILITY

1 INCOME, WORKERS' COMPENSATION OR AUTOMOBILE MEDICAL PAYMENT
2 INSURANCE.

3 (2) "Volunteer ambulance service" means any nonprofit
4 chartered corporation, association or organization located in
5 this Commonwealth, which is licensed by the Department of Health
6 and is not associated or affiliated with any hospital and which
7 is regularly engaged in the provision of emergency medical
8 services, including basic life support or advanced life support
9 services and the transportation of patients within this
10 Commonwealth.

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