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AMENDMENTS TO HOUSE BILL NO. 746

Sponsor: REPRESENTATIVE KILLION

Printer's No. 2004

1 Amend Bill, page 1, line 29, by inserting a comma after 2 "PARENTS" 3 Amend Bill, page 1, line 30, by striking out "AND" and 4 inserting a comma 5 Amend Bill, page 1, line 31, by inserting after "COVERAGE" 6 and for BasicCare health insurance 7 Amend Bill, page 23, lines 25 and 26, by striking out "AN" in line 25 and "ARTICLE" in line 26 and inserting 8 9 articles 10 Amend Bill, page 42, by inserting between lines 29 and 30 11 ARTICLE XLIII 12 BASICCARE HEALTH INSURANCE Section 4301. Scope of article. 13 This article relates to BasicCare health insurance. 14 15 Section 4302. Definitions. The following words and phrases when used in this article 16 shall have the meanings given to them in this section unless the 17 context clearly indicates otherwise: 18 "BasicCare policy." A health benefit plan that provides 19 20 health or sickness and accident coverage as specified in the Special Care, Guaranteed Renewable, Hospital Benefit Contract 21 22 for Direct Payment Subscribers, Form 4044 on file with the department as of April 2, 2009, to an individual or small 23 employer group with coverage for dependents offered as an 24 additional option. 25 26 "Department." The Insurance Department of the Commonwealth.

by an insurer. The term does not include any of the following:

"Health benefit plan." An individual or group health

28 <u>insurance policy</u>, <u>subscriber contract</u>, <u>certificate or plan</u>,

which provides medical or health care coverage by a health care

facility or licensed health care provider and which is offered

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           (1) An accident-only policy.
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           (2) A limited benefit policy.
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           (3) A credit-only policy.
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          (4) A long-term care or disability income policy.
          (5) A specified disease policy.
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           (6) A Medicare supplement policy.
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           (7) A Civilian Health and Medical Program of the
      Uniformed Services (CHAMPUS) supplement policy.
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           (8) An automobile medical payment policy under 75
       Pa.C.S. (relating to vehicles).
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           (9) A vision-only policy.
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           (10) A workers' compensation policy.
           (11) A dental policy.
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           (12) A fixed indemnity policy.
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       "Insurer." A company or insurance entity licensed in this
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   Commonwealth to issue an individual or group insurance policy,
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   subscriber contract, certificate or plan which is offered or
   governed under any of the following:
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          (1) This act.
           (2) The act of December 29, 1972 (P.L.1701, No.364),
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       known as the Health Maintenance Organization Act.
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           (3) The act of May 18, 1976 (P.L.123, No.54), known as
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       the Individual Accident and Sickness Insurance Minimum
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       Standards Act.
           (4) 40 Pa.C.S. Ch. 61 (relating to hospital plan
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      corporations) or Ch. 63 (relating to professional health
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       services plan corporations).
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       "Small employer group." A group of at least two but not more
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   than 50 individuals employed by the same person.
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   Section 4303. BasicCare policy.
       (a) Requirement. -- Within 90 days of the effective date of
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   this section, an insurer issuing or delivering a health benefit
   plan in this Commonwealth shall make available for purchase by
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   individuals and small employer groups a BasicCare policy.
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       (b) Coverage. -- Coverage under a BasicCare policy shall be
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   subject to any copayment permitted under the Special Care,
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   Guaranteed Renewable, Hospital Benefit Contract for Direct
   Payment Subscribers, Form 4044 on file with the department as of
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   April 2, 2009.
       (c) Cost sharing. -- Coverage under a BasicCare policy may be
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   subject to coinsurance or deductible.
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       (d) Exclusion. -- An insurer may exclude coverage under a
   BasicCare policy for an individual who has not been covered by a
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   health benefit plan for more than 30 days, for up to one year
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   for medical conditions for which medical advice or treatment was
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   received by the individual during the 12 months prior to the
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   effective date of the individual's BasicCare policy.
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       (e) Applicability. -- No law, regulation or administrative
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50 51 service or requiring the reimbursement, utilization or inclusion

directive requiring the coverage of a health care benefit or

of a specific category of licensee shall apply to a BasicCare

- 1 policy delivered or issued for delivery in this Commonwealth
- 2 under the authority granted under this article, including the
- 3 provision of the benefits or requirements mandated under Article
- 4 VI-A, or regulations promulgated under this act.
- 5 <u>Section 4304. Department duties.</u>
- The department shall take all actions necessary to ensure
- that insurers make available for purchase BasicCare policies no
- 8 <u>later than 90 days following the effective date of this section.</u>