

THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 430 Session of
2005

INTRODUCED BY ORIE, RAFFERTY, COSTA AND BOSCOLA, MARCH 22, 2005

REFERRED TO BANKING AND INSURANCE, MARCH 22, 2005

AN ACT

1 Amending the act of December 3, 1998 (P.L.925, No.115), entitled
2 "An act providing for screening of patients for symptoms of
3 domestic violence; establishing the Domestic Violence Health
4 Care Response Program in the Department of Public Welfare;
5 and providing for domestic violence medical advocacy projects
6 to assist in implementation of domestic violence policies,
7 procedures, health care worker training and hospital, health
8 center and clinic response to domestic violence victims,"
9 providing for domestic violence managed care response.

10 The General Assembly of the Commonwealth of Pennsylvania
11 hereby enacts as follows:

12 Section 1. Section 2 of the act of December 3, 1998
13 (P.L.925, No.115), known as the Domestic Violence Health Care
14 Response Act, is amended to read:

15 Section 2. Definitions.

16 The following words and phrases when used in this act shall
17 have the meanings given to them in this section unless the
18 context clearly indicates otherwise:

19 "Adult examination questionnaire." A form utilized by a
20 managed care plan, a health care practitioner employed by a
21 managed care plan or a health care practitioner contracting with

1 a managed care plan to assess and record the status of an
2 enrollee's health during a routine or annual physical
3 evaluation.

4 "Department." The Department of Public Welfare of the
5 Commonwealth.

6 "Domestic violence program." A nonprofit organization or
7 program having a primary purpose of providing services to
8 domestic violence victims, including, but not limited to, crisis
9 hotline, safe homes or shelter, community education, counseling,
10 victim advocacy, systems intervention and information,
11 transportation, information and referral and victim assistance.

12 "Enrollee." A policyholder, subscriber, covered person or
13 other individual who is entitled to receive health care services
14 under a managed care plan.

15 "Health center." A for-profit or nonprofit health center
16 providing clinically related health services.

17 "Health clinic." A for-profit or nonprofit clinic providing
18 health services.

19 "Hospital." A for-profit or nonprofit basic, general or
20 comprehensive hospital providing clinically related health
21 services.

22 "Managed care plan." A health care plan that integrates the
23 financing and delivery of health care services to enrollees by
24 arrangements with health care providers selected to participate
25 on the basis of specific standards and provides financial
26 incentives for enrollees to use the participating health care
27 providers in accordance with procedures established by the plan.
28 A managed care plan includes health care arranged through an
29 entity operating under any of the following:

30 (1) Section 630 or Article XXIV of the act of May 17,

1 1921 (P.L.682, No.284), known as The Insurance Company Law of
2 1921.

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

5 (3) 40 Pa.C.S. Ch. 61 (relating to hospital plan
6 corporations).

7 (4) 40 Pa.C.S. Ch. 63 (relating to professional health
8 services plan corporations).

9 The term includes an entity, including a municipality, whether
10 licensed or unlicensed, that contracts with or functions as a
11 managed care plan to provide health care services to enrollees.

12 The term does not include ancillary service plans or an
13 indemnity arrangement which is primarily fee-for-service.

14 "Medical advocacy." The provision of education and training
15 for the purpose of universal screening in order to identify
16 victims of domestic violence who are seeking medical treatment
17 for related or unrelated reasons.

18 "Prenatal examination guidelines." Standards or procedures
19 developed by a managed care plan to establish the level of care
20 to be provided to pregnant enrollees by health care
21 practitioners.

22 "Universal screening." The process of asking patients
23 seeking medical treatment at a hospital, health center or clinic
24 during the course of medical examinations or treatment about the
25 possibility of domestic violence within their relationships,
26 regardless of whether they are suspected to be victims of
27 domestic violence.

28 Section 2. The act is amended by adding a section to read:

29 Section 3.1. Domestic violence managed care response.

30 (a) Purpose.--The purpose of this section is to require

managed care plans to establish universal screening procedures to be utilized by employed or contracted health care practitioners in adult and prenatal examinations of enrollees.

(b) Requirements.--Each managed care organization shall:

(1) Collaborate with local community-based domestic violence programs and Statewide domestic violence organizations in developing and implementing universal screening methodologies, including modifications to the managed care organization's prenatal examination guidelines and adult examination questionnaire.

(2) Assist domestic violence medical advocacy projects, hospitals, health centers, clinics and organized provider networks in:

(i) Developing and implementing uniform multidisciplinary domestic violence policies and procedures which incorporate the roles and responsibilities of all staff who provide services or interact with victims of domestic violence, including the identification of victims of domestic violence through universal screening.

(ii) Developing and implementing a multidisciplinary, comprehensive and ongoing domestic violence education and training program for hospital, health center or clinic personnel adapted to the particular demographics, policies, staffing patterns and resources of the hospital, health center or clinic. The training program shall include, but is not limited to, identifying characteristics of domestic violence, screening patients for domestic violence, appropriately documenting in the medical record and offering referral

1 services, including domestic violence resources available
2 in the community.

3 (3) Provide educational materials informing enrollees
4 about the services and assistance available for victims of
5 domestic violence.

6 (c) Regulations.--The Insurance Department is authorized to
7 promulgate regulations to enforce the provisions of this
8 section.

9 (d) Report.--Three years following the effective date of
10 this section, the Health Care Cost Containment Council shall
11 review the implementation efforts and cost implications of this
12 section on managed care organizations. Utilizing the information
13 gathered in this review, the council shall compile a report to
14 be submitted to the President pro tempore of the Senate and the
15 Minority Leader of the Senate and the Speaker of the House of
16 Representatives and the Minority Leader of the House of
17 Representatives.

18 Section 3. This act shall take effect in 90 days.