

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1385 Session of  
2007

INTRODUCED BY GIBBONS, DERMODY, BELFANTI, BISHOP, COHEN, CURRY,  
FABRIZIO, GEIST, GEORGE, GOODMAN, GRUCELA, JOSEPHS, KIRKLAND,  
KORTZ, KOTIK, KULA, MCGEEHAN, PETRONE, PYLE, SABATINA,  
SOLOBAY, TANGRETTI, THOMAS, WALKO, WANSACZ, J. WHITE AND  
YOUNGBLOOD, MAY 29, 2007

REFERRED TO COMMITTEE ON INSURANCE, MAY 29, 2007

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," providing for insurance coverage of  
12 home health care following chemotherapy.

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 633.1. Home Health Care Following Chemotherapy.--(a)  
19 (1) A health insurance policy delivered, issued, executed or  
20 renewed in this Commonwealth on or after the effective date of  
21 this section shall provide coverage for home health care visits

following in-hospital or outpatient chemotherapy treatment for the length of time that the treating physician determines is necessary.

(2) Coverage under this section shall remain subject to any copayment, coinsurance or deductible amounts set forth in the policy.

(3) An insurer may not deny a patient eligibility or continued eligibility to enroll or to renew coverage under the terms of the health insurance policy solely for the purpose of avoiding the requirements of this act.

(b) This section shall not apply to the following types of policies:

(1) Accident only.

(2) Limited benefit.

(3) Credit.

(4) Dental.

(5) Vision.

(6) Specified disease.

(7) Medicare supplement.

(8) Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) supplement.

(9) Long-term care or disability income.

(10) Workers' compensation.

(11) Automobile medical payment.

(c) (1) The term "health insurance policy" when used in this section means any individual or group health insurance policy, subscriber contract, certificate or plan which provides medical or health care coverage by any health care facility or licensed health care provider which is offered by or is governed under this act or any of the following:

1     (i) Subarticle (f) of Article IV of the act of June 13, 1967  
2     (P.L.31, No.21), known as the "Public Welfare Code."

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

5     (iii) The act of May 18, 1976 (P.L.123, No.54), known as the  
6     "Individual Accident and Sickness Insurance Minimum Standards  
7     Act."

8     (iv) A nonprofit corporation subject to 40 Pa.C.S. Ch. 61  
9     (relating to hospital plan corporations) or 63 (relating to  
10    professional health services plan corporations).

11    (2) The term "insurer" when used in this section means any  
12    entity that issues an individual or group health insurance  
13    policy, contract or plan described under clause (1) of this  
14    subsection.

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