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THE GENERAL ASSEMBLY OF PENNSYLVANIA

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HOUSE BILL

No. 2168 Session of  
2021

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INTRODUCED BY FREEMAN, SCHLOSSBERG, HOHENSTEIN, HILL-EVANS,  
KINSEY, McNEILL, SANCHEZ, SCHWEYER, DRISCOLL, CIRESI, DALEY  
AND KIM, DECEMBER 15, 2021

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REFERRED TO COMMITTEE ON LABOR AND INDUSTRY, DECEMBER 15, 2021

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AN ACT

1 Authorizing the State Workers' Insurance Board to make available  
2 health insurance policies for purchase by the general public;  
3 providing for premiums; and authorizing a loan from the State  
4 Workers' Insurance Fund.

5 The General Assembly of the Commonwealth of Pennsylvania  
6 hereby enacts as follows:

7 Section 1. Short title.

8 This act shall be known and may be cited as the State  
9 Workers' Insurance Board Health Insurance Program Act.

10 Section 2. Definitions.

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

14 "Ancillary health service provider." A clinical laboratory  
15 permittee under the act of September 26, 1951 (P.L.1539,  
16 No.389), known as The Clinical Laboratory Act, authorized under  
17 the laws of this Commonwealth to provide ancillary health  
18 services.

1 "Ancillary health services." The general and usual services  
2 rendered and care administered by ancillary health service  
3 providers.

4 "Board." The State Workers' Insurance Board continued under  
5 section 1502 of the act of June 2, 1915 (P.L.736, No.338), known  
6 as the Workers' Compensation Act.

7 "Chiropractic services." The general and usual services  
8 rendered and care administered by a chiropractor, as defined in  
9 section 102 of the act of December 16, 1986 (P.L.1646, No.188),  
10 known as the Chiropractic Practice Act.

11 "Fund." The State Workers' Insurance Fund established under  
12 section 1504 of the Workers' Compensation Act.

13 "Medical services." The general and usual services rendered  
14 and care administered by doctors of medicine under the act of  
15 December 20, 1985 (P.L.457, No.112), known as the Medical  
16 Practice Act of 1985.

17 "Osteopathic services." The general and usual services  
18 rendered and care administered by doctors of osteopathy under  
19 the act of October 5, 1978 (P.L.1109, No.261), known as the  
20 Osteopathic Medical Practice Act.

21 "Physical therapy services." The general and usual services  
22 rendered and care administered by licensed physical therapists,  
23 as defined as "physical therapy" in section 2 of the act of  
24 October 10, 1975 (P.L.383, No.110), known as the Physical  
25 Therapy Practice Act.

26 "Podiatry services." The general and usual services rendered  
27 and care administered by doctors of podiatry under the act of  
28 March 2, 1956 (1955 P.L.1206, No.375), known as the Podiatry  
29 Practice Act.

30 "Program." The program established by the board under

1 section 3(a).

2 Section 3. Program.

3 (a) General rule.--In addition to any other powers and  
4 duties imposed by law, the board shall have the power and may  
5 establish, implement and administer a program which provides for  
6 the sale of health insurance coverage to individuals, businesses  
7 or other entities in a form and at premiums as the board shall,  
8 from time to time, determine.

9 (b) Loan from fund.--After considering all other  
10 expenditures from the fund, the board may borrow from the fund  
11 in the form of a repayable loan amounts as may be necessary to  
12 provide for the payment of claims and administrative expenses  
13 that may arise from the program. A loan made from the fund shall  
14 not exceed 40% of the fund's current ending balance for the  
15 latest completed fiscal year. The board may invest the proceeds  
16 of the loan in the same manner and subject to the same  
17 restrictions as govern investments of the fund. All earnings  
18 from investments of the loan proceeds shall be used for the  
19 administration of this act.

20 (c) Repayments from premiums.--The board shall designate a  
21 portion of each periodic premium payment for loan repayment.

22 (d) Minimum coverage.--The board, at a minimum, shall  
23 provide coverage under the program for at least the following:

- 24 (1) Inpatient hospitalization.
- 25 (2) Outpatient hospitalization.
- 26 (3) Emergency care.
- 27 (4) Preventive care.
- 28 (5) Professional services, including:
  - 29 (i) Medical services.
  - 30 (ii) Osteopathic services.

1 (iii) Chiropractic services.  
2 (iv) Podiatry services.  
3 (v) Physical therapy services.  
4 (vi) Services provided by:  
5 (A) Certified registered nurse anesthetists.  
6 (B) Certified registered nurse practitioners.  
7 (C) Certified enterostomal therapy nurses.  
8 (6) Laboratory tests, x-rays, scans, wound dressings,  
9 castings and other ancillary health services.  
10 (e) Additional coverage.--The board may offer coverage under  
11 the program for the following:  
12 (1) Dental benefits.  
13 (2) Vision care benefits.  
14 (3) Prescription drug benefits.  
15 (f) Claim forms.--The board shall use the standard medical  
16 claim form prescribed under section 1202 of the act of May 17,  
17 1921 (P.L.682, No.284), known as The Insurance Company Law of  
18 1921.  
19 (g) Marketing.--The health insurance coverage provided  
20 through the program shall be sold directly by the board and  
21 independent insurance agents as determined by the board.  
22 (h) Regulations.--The board shall promulgate regulations  
23 necessary to implement and administer the provisions of this  
24 act.  
25 Section 4. Effective date.  
26 This act shall take effect January 1, 2022, or immediately,  
27 whichever is later.