
THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1526 Session of
2013

INTRODUCED BY FREEMAN, MURT, DeLUCA, FRANKEL, CALTAGIRONE,
FABRIZIO, HARKINS AND YOUNGBLOOD, JUNE 13, 2013

REFERRED TO COMMITTEE ON LABOR AND INDUSTRY, JUNE 13, 2013

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 Optional
9 Health Insurance Program of the State Workers' Insurance Fund
10 Act.

11 Section 2. Definitions.

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

15 "Ancillary health service providers." Clinical laboratory
16 permittees under the act of September 26, 1951 (P.L.1539,
17 No.389), known as The Clinical Laboratory Act, duly licensed or
18 certified under the laws of this Commonwealth to provide
19 ancillary health 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 act of June 2, 1915 (P.L.736, No.338), known
13 as the Workers' Compensation Act.

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

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

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

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

30 Section 3. Optional health insurance program.

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

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

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

21 (d) Minimum health insurance coverage.--The board, at a
22 minimum, shall provide coverage for at least the following:

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

1 (iv) Podiatry services.

2 (v) Physical therapy services.

3 (vi) Services provided by:

4 (A) Certified registered nurse anesthetists.

5 (B) Certified registered nurse practitioners.

6 (C) Certified enterostomal therapy nurses.

7 (6) Laboratory tests, x-rays, scans, wound dressings,

8 castings and other ancillary services.

9 (e) Additional insurance coverage.--The board may offer

10 coverage for the following:

11 (1) Dental benefits.

12 (2) Vision care benefits.

13 (3) Prescription drug benefits.

14 (f) Claim forms.--The board shall use the standard medical

15 claim form prescribed under section 1202 of the act of May 17,

16 1921 (P.L.682, No.284), known as The Insurance Company Law of

17 1921.

18 (g) Marketing.--The health insurance coverage shall be sold

19 directly by the board and such independent insurance agents as

20 determined by the board.

21 (h) Regulations.--The board shall promulgate all regulations

22 necessary to implement and administer the provisions of this

23 act.

24 Section 4. Effective date.

25 This act shall take effect January 1, 2014.