THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 469

Session of 2019

INTRODUCED BY DeLUCA, FRANKEL, A. DAVIS, HILL-EVANS, HARKINS, KINSEY, SANCHEZ, NEILSON, SCHLOSSBERG, YOUNGBLOOD, D. MILLER, CONKLIN, ISAACSON, DEASY, PASHINSKI, FREEMAN, KORTZ, CALTAGIRONE, SCHWEYER, McNEILL, DONATUCCI, FITZGERALD, KRUEGER, HARRIS, BRIGGS, ULLMAN, MULLINS, WARREN, BOYLE, COMITTA, BULLOCK, MADDEN, RAVENSTAHL, BURGOS, KENYATTA, READSHAW, KIRKLAND, MARKOSEK, T. DAVIS, SAMUELSON, DERMODY, GOODMAN, McCLINTON, CIRESI AND SIMS, FEBRUARY 11, 2019

REFERRED TO COMMITTEE ON INSURANCE, FEBRUARY 11, 2019

AN ACT

Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An act relating to insurance; amending, revising, and 2 consolidating the law providing for the incorporation of 3 insurance companies, and the regulation, supervision, and protection of home and foreign insurance companies, Lloyds associations, reciprocal and inter-insurance exchanges, and 6 fire insurance rating bureaus, and the regulation and 7 supervision of insurance carried by such companies, 8 associations, and exchanges, including insurance carried by 9 10 the State Workmen's Insurance Fund; providing penalties; and repealing existing laws," in casualty insurance, providing 11 coverage for essential health benefits. 12 13 The General Assembly of the Commonwealth of Pennsylvania 14 hereby enacts as follows: 15 The act of May 17, 1921 (P.L.682, No.284), known Section 1. 16 as The Insurance Company Law of 1921, is amended by adding a 17 section to read: 18 Section 635.8. Coverage for Essential Health Benefits. -- (a)

A health insurance policy offered, issued or renewed in this

Commonwealth shall include coverage for essential health

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- 1 benefits.
- 2 (b) Notwithstanding any other provision of law, the
- 3 provisions of this section providing greater protections to
- 4 <u>individuals insured under a health insurance policy shall be</u>
- 5 construed to supersede any law relating to a requirement of the
- 6 Patient Protection and Affordable Care Act (Public Law 111-148,
- 7 124 Stat. 119), except to the extent this section prevents the
- 8 application of a requirement of the Patient Protection and
- 9 <u>Affordable Care Act.</u>
- 10 (c) This act shall apply as follows:
- 11 (1) For health insurance policies for which either rates or
- 12 forms are required to be filed with the Insurance Department or
- 13 the Federal Government, this act shall apply to any policy for
- 14 which a form or rate is first filed on or after the effective
- 15 date of this section.
- 16 (2) For health insurance policies for which neither rates
- 17 nor forms are required to be filed with the Insurance Department
- 18 or the Federal Government, this act shall apply to any policy
- 19 issued or renewed on or after one hundred eighty days after the
- 20 <u>effective date of this section.</u>
- 21 (d) The Insurance Department may promulgate regulations
- 22 necessary for the implementation and administration of this
- 23 <u>section</u>.
- 24 (e) As used in this section, the following words and phrases
- 25 shall have the meanings given to them in this subsection unless
- 26 the context clearly indicates otherwise:
- 27 "Essential health benefits" means health care services and
- 28 benefits in the following categories:
- 29 (1) Ambulatory patient services.
- 30 (2) Emergency services.

- 1 (3) Hospitalization.
- 2 (4) Maternity and newborn health care.
- 3 (5) Mental health and substance use disorder services,
- 4 <u>including</u>, but not limited to, behavioral health treatment.
- 5 (6) Prescription drugs.
- 6 (7) Rehabilitative and habilitative services and devices.
- 7 (8) Laboratory services.
- 8 (9) Preventive and wellness services and chronic disease
- 9 <u>management</u>.
- 10 (10) Pediatric services, including, but not limited to, oral
- 11 and vision care.
- "Health insurance policy" means a policy, subscriber
- 13 contract, certificate or plan, issued by an insurer that
- 14 provides medical or health care coverage. The term does not
- 15 include any of the following policies:
- 16 <u>(1) Accident only.</u>
- 17 (2) Credit only.
- 18 (3) Long-term care or disability income.
- 19 (4) Specified disease.
- 20 (5) Medicare supplement.
- 21 (6) Tricare, including a Civilian Health and Medical Program
- 22 of the Uniformed Services (CHAMPUS) supplement.
- 23 (7) Fixed indemnity.
- 24 (8) Dental only.
- 25 <u>(9) Vision only.</u>
- 26 <u>(10) Workers' compensation.</u>
- 27 (11) Automobile medical payment under Pa.C.S. § 75 (relating
- 28 to vehicles).
- 29 <u>"Health insurer" means an entity licensed by the Insurance</u>
- 30 Department with accident and health authority to issue a policy,

- 1 <u>subscriber contract</u>, <u>certificate or plan that provides medical</u>
- 2 or health care coverage that is offered or governed under any of
- 3 the following:
- 4 (1) This act, including, but not limited to, section 630 and
- 5 Article XXIV of this act.
- 6 (2) The act of December 29, 1972 (P.L.1701, No.364), known
- 7 <u>as the "Health Maintenance Organization Act."</u>
- 8 (3) 40 Pa.C.S. Ch. 61 (relating to hospital plan
- 9 <u>corporations</u>) or 63 (relating to professional health services
- 10 plan corporations).
- 11 Section 2. This act shall take effect in 30 days.