

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 2138 Session of 2024

INTRODUCED BY STEELE, HANBIDGE, PROBST, SCHLOSSBERG, KAZEEM, SANCHEZ, DALEY, BOROWSKI, SCOTT, BELLMON, PISCIOTTANO, CEPHAS, MAYES, CERRATO, CONKLIN, KENYATTA, D. WILLIAMS, ISAACSON, SHUSTERMAN, O'MARA, GREEN, CURRY, OTTEN, BOYD, SALISBURY, YOUNG AND FLEMING, APRIL 3, 2024

AS REPORTED FROM COMMITTEE ON INSURANCE, HOUSE OF REPRESENTATIVES, AS AMENDED, MAY 6, 2024

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," in casualty insurance, providing
12 for coverage for blood pressure monitors.

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 635.9. Coverage for Blood Pressure Monitors.--(a) A
19 health insurance policy that is offered, issued or renewed in
20 this Commonwealth shall provide coverage, including
21 reimbursement, for MEDICALLY NECESSARY blood pressure monitors <--

1 for pregnant or postpartum insureds for each pregnancy.

2 (b) As used in this section:

3 "Health insurance policy" means a policy, subscriber  
4 contract, certificate or plan issued by a health insurer that  
5 provides medical or health care coverage. The term does not  
6 include any of the following:

7 (1) An accident only policy.

8 (2) A credit only policy.

9 (3) A long-term care or disability income policy.

10 (4) A specified disease policy.

11 (5) A Medicare supplement policy.

12 (6) A fixed indemnity policy.

13 (7) A hospital indemnity policy.

14 (8) A dental only policy.

15 (9) A vision only policy.

16 (10) A workers' compensation policy.

17 (11) An automobile medical payment policy.

18 (12) A policy under which benefits are provided by the  
19 Federal Government to active or former military personnel and  
20 their dependents.

21 (13) Any other similar policy providing for limited  
22 benefits.

23 "Insurer" means an entity licensed by the department that  
24 offers, issues or renews an individual or group health insurance  
25 policy that is offered or governed under any of the following:

26 (1) This act, including section 630 and Article XXIV.

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

29 (3) 40 Pa.C.S. Ch. 61 (relating to hospital plan  
30 corporations) or 63 (relating to professional health services

1 plan corporations).

2 "Postpartum" means within one year of delivery or the end of  
3 pregnancy.

4 Section 2. The following shall apply:

5 (1) For a health insurance policy for which either rates  
6 or forms are required to be filed with the Federal Government  
7 or the Insurance Department, section 635.9 of the act shall  
8 apply to a policy for which a form or rate is first filed on  
9 or after the effective date of this paragraph.

10 (2) For a health insurance policy for which neither  
11 rates nor forms are required to be filed with the Federal  
12 Government or the Insurance Department, section 635.9 of the  
13 act shall apply to a policy issued or renewed on or after 180  
14 days after the effective date of this paragraph.

15 Section 3. This act shall take effect in 60 days.