

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 339 Session of 2015

INTRODUCED BY BARRAR, O'NEILL, COHEN, D. COSTA, M. DALEY, DUSH, GABLER, GILLEN, A. HARRIS, KORTZ, MURT, READSHAW, SACCONI, TALLMAN, MOUL, FARRY AND BARBIN, FEBRUARY 5, 2015

AS AMENDED ON SECOND CONSIDERATION, HOUSE OF REPRESENTATIVES, JUNE 2, 2015

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," further providing for emergency
12 services.

13 The General Assembly of the Commonwealth of Pennsylvania
14 hereby enacts as follows:

15 Section 1. Section 2116 of the act of May 17, 1921 (P.L.682,
16 No.284), known as The Insurance Company Law of 1921, added June
17 17, 1998 (P.L.464, No.68), is amended to read:

18 Section 2116. Emergency Services.--(a) If an enrollee seeks
19 emergency services and the emergency health care provider
20 determines that emergency services are necessary, the emergency
21 health care provider shall initiate necessary intervention to
22 evaluate and, if necessary, stabilize the condition of the

1 enrollee without seeking or receiving authorization from the
2 managed care plan. The managed care plan shall pay all
3 reasonably necessary costs associated with the emergency
4 services provided during the period of the emergency. When
5 processing a reimbursement claim for emergency services, a
6 managed care plan shall consider both the presenting symptoms
7 and the services provided. The emergency health care provider
8 shall notify the enrollee's managed care plan of the provision
9 of emergency services and the condition of the enrollee. If an
10 enrollee's condition has stabilized and the enrollee can be
11 transported without suffering detrimental consequences or
12 aggravating the enrollee's condition, the enrollee may be
13 relocated to another facility to receive continued care and
14 treatment as necessary.

15 (b) If an emergency medical services agency is dispatched by
16 a public safety answering point, as defined in 35 Pa.C.S. § 5302
17 (relating to definitions) and provides medically necessary
18 emergency care, including advanced life support services under
19 35 Pa.C.S. Ch. 81 (relating to emergency medical services
20 system), to an enrollee and the enrollee does not require
21 transport or refuses to be transported, the managed care plan
22 shall pay all reasonably necessary costs associated with the
23 emergency ~~medical~~ services provided during the period of the <--
24 emergency. All payments made by the managed care plan for a <--
25 service performed by the emergency medical services agency
26 during the period of the emergency shall be paid directly to the
27 emergency medical services agency.

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