
THE GENERAL ASSEMBLY OF PENNSYLVANIA

SENATE BILL

No. 345 Session of
2013

INTRODUCED BY FOLMER, MENSCH, HUTCHINSON, WHITE, PILEGGI, WAUGH,
ALLOWAY AND BAKER, JANUARY 30, 2013

REFERRED TO BANKING AND INSURANCE, JANUARY 30, 2013

AN ACT

1 Providing for the expiration of certain State-mandated health
2 care insurance benefits and the provisions of certain acts
3 that impose mandatory covered providers and covered persons
4 on qualified high deductible health plans; and requiring the
5 Health Care Cost Containment Council to submit a periodic
6 report to the General Assembly.

7 The General Assembly of the Commonwealth of Pennsylvania
8 hereby enacts as follows:

9 Section 1. Short title.

10 This act shall be known and may be cited as the State-
11 mandated Health Care Insurance Expiration Act.

12 Section 2. Definitions.

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

16 "Council." The Health Care Cost Containment Council of the
17 Commonwealth.

18 "Health insurance policy." An individual or group health,
19 sickness or accident policy or subscriber contract or
20 certificate issued by an entity subject to any one of the

1 following:

2 (1) The act of May 17, 1921 (P.L.682, No.284), known as
3 The Insurance Company Law of 1921.

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

6 (3) The act of May 18, 1976 (P.L.123, No.54), known as
7 the Individual Accident and Sickness Insurance Minimum
8 Standards Act.

9 (4) 40 Pa.C.S. Ch. 61 (relating to hospital plan
10 corporations) or 63 (relating to professional health services
11 plan corporations).

12 "Qualified high deductible health plan." A health insurance
13 policy that would qualify as a high deductible health plan under
14 section 223(c)(2) of the Internal Revenue Code of 1986 (Public
15 Law 99-514, 26 U.S.C. § 223(c)(2)).

16 "State-mandated health care insurance benefit." The right,
17 established by an act of the General Assembly, of an insured
18 under a health insurance policy to receive reimbursement from
19 the insurer of an expenditure or cost of a medical test,
20 procedure or service related to the health of the insured, which
21 test, procedure or service is provided by a medical provider.

22 Section 3. Mandatory covered benefit expiration.

23 (a) Existing provisions affected.--Notwithstanding any other
24 provision of law to the contrary, the State-mandated health care
25 insurance benefits under the following provisions of law shall
26 be inapplicable on and after January 1, 2014, as to qualified
27 high deductible health plans:

28 Sections 602-A, 603-A and 2111(4) and (7) of the act of
29 May 17, 1921 (P.L.682, No.284), known as The Insurance
30 Company Law of 1921.

1 Section 4 of the act of May 18, 1976 (P.L.123, No.54),
2 known as the Individual Accident and Sickness Insurance
3 Minimum Standards Act.

4 Section 4 of the act of December 19, 1986 (P.L.1737, No.
5 209), known as the Insurance Payment to Registered Nurse Law.

6 Section 3 of the act of May 21, 1992 (P.L.239, No.35),
7 known as the Childhood Immunization Insurance Act.

8 Section 4 of the act of April 22, 1994 (P.L.136, No.20),
9 known as the Women's Preventative Health Services Act.

10 Section 3 of the act of July 2, 1996 (P.L.514, No.85),
11 known as the Health Security Act.

12 Section 4 of the act of December 20, 1996 (P.L.1492, No.
13 191), known as the Medical Foods Insurance Coverage Act.

14 (b) Future provisions affected.--Any act or part of an act
15 of the General Assembly that is enacted after the effective date
16 of this section and provides for the imposition of a State-
17 mandated health care insurance benefit on qualified high
18 deductible health plans shall expire five years after the
19 effective date of such act or part of the act.

20 Section 4. Mandatory covered provider expiration.

21 (a) Existing provisions.--Notwithstanding any other
22 provision of law to the contrary, the following provisions of
23 law shall be inapplicable on and after January 1, 2014, as to
24 qualified high deductible health plans:

25 The act of December 27, 1965 (P.L.1247, No.506), entitled
26 "An act relating to the reimbursement or payments for
27 providing and furnishing optometric services in contracts,
28 certificates and policies by various insurance and other
29 companies, and limiting the provisions in relation thereto."

30 The act of August 12, 1971 (P.L.313, No.78), entitled "An

1 act providing for elimination of discriminatory provisions
2 relating to compensation for services and treatment under
3 sickness and accident insurance contracts and providing for
4 nondiscriminatory reimbursement of sickness and bodily injury
5 claims thereunder."

6 The act of April 18, 1978 (P.L.33, No.16), entitled "An
7 act providing reimbursement to insured by insurance company
8 for services performed by a psychologist."

9 The act of December 23, 1981 (P.L.583, No.168), entitled
10 "An act providing for reimbursement by insurance companies
11 and others for facilities used by or for services performed
12 by licensed certified nurse midwives."

13 The act of December 19, 1986 (P.L.1737, No.209), known as
14 the Insurance Payment to Registered Nurse Law.

15 (b) Future provisions affected.--Any act or part of an act
16 of the General Assembly that is enacted after the effective date
17 of this section and requires insurers of health or accident
18 insurance to reimburse for services provided by any provider of
19 medical services of any kind under qualified high deductible
20 health plans shall expire five years after the effective date of
21 such act or part of the act.

22 Section 5. Mandatory covered persons expiration.

23 (a) Existing provisions.--Notwithstanding any other
24 provision of law to the contrary, the following provisions shall
25 be inapplicable on and after January 1, 2014, as to qualified
26 high deductible health plans:

27 Sections 617(A) (9) and 621.2(d) of the act of May 17,
28 1921 (P.L.682, No.284), known as The Insurance Company Law of
29 1921.

30 The act of August 1, 1975 (P.L.157, No.81), entitled "An

1 act providing for the health and welfare of newborn children
2 and their parents by regulating certain health insurance
3 coverage for newborn children."

4 The act of December 16, 1994 (P.L.1333, No.152),
5 entitled, "An act requiring health insurers to cover adopted
6 children."

7 (b) Future provisions affected.--Any act or part of an act
8 of the General Assembly that is enacted after the effective date
9 of this section and requires insurers of health or accident
10 insurance to reimburse for services provided to certain
11 specified covered persons as insureds under qualified high
12 deductible health plans expire five years after the effective
13 date of such act or part of the act.

14 Section 6. Report to General Assembly.

15 No later than 60 days prior to the expiration of the
16 provisions of the acts identified under section 3(a), 4(a) or
17 5(a) and the expiration of the provisions of an act to which
18 section 3(b), 4(b) or 5(b) applies, the council shall submit a
19 written report to the General Assembly that includes an analysis
20 of the impact that the provisions of those acts identified under
21 section 3(a), 4(a) or 5(a) or that act to which section 3(b),
22 4(b) or 5(b) applies, on the cost of health insurance premiums
23 for qualified high deductible health plans in this Commonwealth.

24 Section 7. Effective date.

25 This act shall take effect in 60 days.