

LEG REG REVIEW

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LEG REG REVIEW is a periodic newsletter produced by Vince Phillips who retired from active lobbying after 31 years of advocacy in Harrisburg. It contains news on the legislative and regulatory scene in Pennsylvania that may be of interest to the Insurance and Business Communities. Annual subscriptions are \$100 and information may be obtained by contacting PHILLIPS ASSOCIATES at 717/728-1217 or e-mail to xenobun@aol.com.

DEPARTMENT OPENS COMMENT PERIOD FOR HEALTH PREMIUMS

The PA Insurance Department is requesting comments on proposed rate changes requested by health insurance companies for 2024. Public comments will be accepted by the Department through September 8 via ra-in-comments@pa.gov. Proposed average statewide increases of 4.1% were filed for small group plans. The average statewide requested increases for individual health insurance plans are 4.2%.

The state is divided into nine coverage areas by county. A link to the area map follows: [https://www.insurance.pa.gov/Companies/ProductAndRateRequire/Documents/2021%20ACA/Geographic%20Rating%20Areas%20\(Map\).png](https://www.insurance.pa.gov/Companies/ProductAndRateRequire/Documents/2021%20ACA/Geographic%20Rating%20Areas%20(Map).png).

Individual company filings are:

- Capital Advantage Assurance Company average rate request is 7.9% in areas 6,7,9.
- Cigna Health & Life Ins. Company average rate request is 13.1% in area 8.
- Geisinger Health Plan average rate request is 7.3% in areas 2,3,5,6,7,9.
- Geisinger Quality Options average rate request is 7.1% in areas 2,3,5,6,7,9.
- Highmark Benefits Group, Inc. average rate request is 13.2% in areas 3 and 8.
- Highmark Coverage Advantage, Inc. average rate request is 9.9% in areas 1 and 4.
- Highmark, Inc. average rate request is 11.2% in areas 1,2,4,5,6,7,9.
- Independence Blue Cross (QCC Ins. Co.) average rate request is minus 2.7% in area 8.
- Keystone Health Plan Central average rate request is minus 0.3% in areas 6,7,9.
- Keystone Health Plan East, Inc. average rate request is minus 3.5% in area 8.
- Oscar Health Plan of PA, Inc. average rate request is 6.8% in areas 3,6,7,8.
- PA Health & Wellness, Inc. average rate request is 2.3% in areas 3,6,7,8.
- UPMC Health Coverage, Inc. average rate request is 7.6% in areas 1 and 5.
- UPMC Health Options, Inc. average rate request is 6.2% in areas 1,2,3,4,5,6,7,9.

ALTHO NOT IN SESSION, NEW LEGISLATION ABOUNDS

Despite the summer recess for the General Assembly, numbers of bills have been introduced of interest to the Insurance Community. Few of these will see action before the Senate reconvenes on September 18 and the House on September 26.

- **AUTO**

- **House Bill 1535** (Burns-D-Cambria) mandates that auto insurers notify PennDOT when a driver acquires a new auto policy. Currently, insurers report policy cancelations and PennDOT sends out nastygrams to drivers not knowing that new coverage has been secured. Status: House Transportation Committee.

- **HEALTH**

- **House Bill 1562** (Khan-D-Phila.) finds that access to health care is a basic human right and seeks to amend the PA State Constitution. Status: House Health Committee.

- **LIABILITY**

- **Senate Resolution 149** (Brown-R-Monroe) would research a possible no-fault catastrophic loss fund to handle claims regarding birth-related neurological injuries. Status: Senate Banking & Insurance Committee.

- **MANDATED HEALTH CARE BENEFITS**

- **House Bill 1609** (Hanbidge-D-Montgomery) mandates insurer coverage for hearing aids. Status: House Insurance Committee.
- **House Resolution 181** (Hanbidge-D-Montgomery) urges the U.S. Congress to require hearing aid coverage for Medicaid. Status: House Health Committee.
- **House Bill 1618** (Cephas-D-Phila.) mandates health insurance coverage for doulas (“*trained individuals who provide emotional and physical support to women throughout the pregnancy experience.*” **NOTE:** Companion bill is **Senate Bill 335** (Schwank-D-Berks). Status of HB 1618: House Insurance Committee.
- **Senate Bill 878 (Tartaglione-D-Phila.)** provides for standardized reporting by insurers on the provision of alcohol and other drug addiction coverage with copies going to the General Assembly and accessible to the public. **NOTE:** SB 878 uses aggregate data on numbers treated, lengths of stay, denials, etc. Status: Senate Banking & Insurance Committee.
- **Senate Bill 879** (Tartaglione-D-Phila.) requires insurers to certify that they are in compliance with the Federal Mental Health Parity & Addiction Equity Act. Status: Senate Banking & Insurance Committee.
- **Senate Bill 877** (Kane-D-Chester/Delaware) requires that insurance companies, CHIP and Medicaid provide insureds with a bi-annual one or two-page summary of insurance benefits relating to alcohol and drug treatment/recovery. Status: Senate Banking & Insurance Committee.
- **House Resolution 186** (Kinsey-D-Phila.) seeks to ensure access to sickle cell disease treatment. Status: Not yet assigned to committee.

- **PROPERTY CASUALTY: WORKERS COMP**

- **House Bill 1492** (Merski-D-Erie) requires insurer-paid cancer exams every 3 years for professional firefighters. Status: House Veteran Affairs & Emergency Preparedness Committee.
- **House Bill 1377** (Scott-D-Montgomery) establishes a Firefighter Cancer Registry to identify cancer incidence. **NOTE:** The bill allows for public access to data but does not authorize disclosure of “*any confidential or personal identifying information.*” Status: House Health Committee.
- **House Bill 1224** (Warren-D-Bucks) requires that traveling sales operations workers be classified as employees and not independent contractors. This means L&I oversight, health benefits and Workers Compensation Insurance for those workers. Status: House Labor & Industry Committee.

- **SURPLUS LINES**

- **House Bill 1595** (Boyle-D-Phila. and Pickett-R-Bradford) addresses a decision by the PA Supreme Court (*Woodford v. Insurance Department*) whose effect was that surplus lines licensees could not charge a fee in addition to commission. Status: House Insurance Committee.

- **TECHNOLOGY AND INSURANCE**

- **House Bill 1512** (Sappey-D-Chester) mandates insurance coverage for telemedicine health care treatment. **NOTE:** Companion bill is **Senate Bill 739** (Vogel-R-Beaver). Status of HB 1512: House Insurance Committee.
- **House Bill 1585** (Frankel-D-Allegheny) requires health insurance companies to cover tele-dentistry. Status: House Health Committee.

- **TRANSPORTATION**

- **House Bill 1534** (Burns-D-Cambria) requires that PennDOT send reminder texts or emails regarding upcoming vehicle registrations. Status: House Transportation Committee.

FEDS PROPOSE MENTAL HEALTH PARITY RULE

The U.S. Departments of Labor, Health & Human Services, and Treasury are proposing a Rule on insurance requirements for mental health parity. The proposal would require health plans to show compliance with the Mental Health Parity and Addiction Equity Act, the limits plans place on benefits that affect a person’s access to treatment, and how plans construct their provider networks so as to allow access. Comments must be submitted by October 2, 2023. Link: <https://www.federalregister.gov/documents/2023/08/03/2023-15945/requirements-related-to-the-mental-health-parity-and-addiction-equity-act>.