

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1070 Session of 2025

INTRODUCED BY CURRY, D. MILLER, HOHENSTEIN, HILL-EVANS, WAXMAN,
T. DAVIS, GIRAL, PIELLI, PROBST, SANCHEZ, KHAN, MADDEN,
D. WILLIAMS, PARKER, BELLMON, DEASY, CEPEDA-FREYTIZ, RIVERA,
STEELE AND K.HARRIS, MARCH 31, 2025

REFERRED TO COMMITTEE ON HEALTH, MARCH 31, 2025

AN ACT

1 Amending the act of July 2, 1996 (P.L.514, No.85), entitled "An
2 act providing for certain health insurance benefits to aid
3 the health and well-being of mother and child following the
4 birth of a child; and prohibiting certain practices by
5 insurers," further providing for definitions and for
6 postpartum coverage standards; providing for provisions
7 relating to involuntary discharge; and imposing duties on the
8 Department of Human Services.

9 The General Assembly of the Commonwealth of Pennsylvania

10 hereby enacts as follows:

11 Section 1. The definition of "health insurance policy" in
12 section 2 of the act of July 2, 1996 (P.L.514, No.85), known as
13 the Health Security Act, is amended and the section is amended
14 by adding definitions to read:

15 Section 2. Definitions.

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

19 * * *

20 "Government program." A program of government-sponsored or

subsidized health care coverage, including:

(1) The children's health insurance program established under Article XXIII-A of the act of May 17, 1921 (P.L.682, No.284), known as The Insurance Company Law of 1921.

(2) The medical assistance program established under the act of June 13, 1967 (P.L.31, No.21), known as the Human Services Code.

"Health insurance policy." Any individual or group health insurance policy, contract or plan which provides medical or health care coverage by any health care facility or licensed health care provider on an expense-incurred service or prepaid basis and which is offered by or is governed under any of the following:

[Act of May 17, 1921 (P.L.682, No.284), known as] The Insurance Company Law of 1921.

Subarticle (f) of Article IV of the [act of June 13, 1967 (P.L.31, No.21), known as the Public Welfare Code] Human Services Code.

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

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

Act of December 14, 1992 (P.L.835, No.134), known as the Fraternal Benefit Societies Code.

A nonprofit corporation subject to 40 Pa.C.S. Chs. 61 (relating to hospital plan corporations) and 63 (relating to professional health services plan corporations).

* * *

"Observation status." A medical code providing for

monitoring and assessment of a patient's medical condition by
trained and certified medical staff in a hospital or care
setting at a lower level of care and lower rate of billing than
acute care.

Section 2. Section 3 of the act is amended by adding a
subsection to read:

Section 3. Postpartum coverage standards.

* * *

(b.1) Elective postpartum observation and care.--

(1) Consistent with Federal law, every health insurance
policy that provides maternity benefits and is delivered,
issued, executed or renewed in this Commonwealth on or after
January 1, 2026, shall provide additional coverage for
elective postpartum observation and care for a minimum of 24
hours following the 48 hours or 96 hours of inpatient care
specified in subsection (a), at the hospital, birthing center
or other medical facility in which the mother gave birth.

(2) Postpartum counseling services or other child care
information may be provided during the elective postpartum
observation and care period in addition to any other
medically required care to the mother or newborn.

(3) The Department of Human Services shall apply for a
waiver designation to provide for coverage through government
programs for the additional 24 hours of elective postpartum
observation and care.

* * *

Section 3. The act is amended by adding a section to read:
Section 3.1. Involuntary discharge.

(a) Time period.--A hospital, birthing center or other
medical facility may not involuntarily discharge a postpartum

1 patient or newborn between the hours of 10 p.m. and 8 a.m.

2 (b) Billing.--A postpartum patient who refuses discharge
3 between the hours of 10 p.m. and 8 a.m. may be billed under
4 observation status during the period that the postpartum patient
5 remains in the hospital, birthing center or other medical
6 facility and shall receive a level of medical care consistent
7 with the observation status during that time.

8 Section 4. This act shall take effect in 60 days.