By: Cortez H.B. No. 712

## A BILL TO BE ENTITLED

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1	AN ACT
2	relating to health benefit plan coverage for certain tests to
3	detect prostate cancer.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Section 1362.001, Insurance Code, is amended to
6	read as follows:
7	Sec. 1362.001. APPLICABILITY OF CHAPTER. (a) This chapter
8	applies only to a health benefit plan that $[\div$
9	$[\frac{(1)}{(1)}]$ provides benefits for medical or surgical
10	expenses incurred as a result of a health condition, accident, or
11	sickness, including[÷
12	$[\frac{\Lambda}{\Lambda}]$ an individual, group, blanket, or
13	franchise insurance policy or insurance agreement, a group hospital
14	service contract, or an individual or group evidence of coverage
15	that is offered by:
16	(1) $[(i)]$ an insurance company;
17	$\underline{(2)}$ [ $\overline{(ii)}$ ] a group hospital service corporation
18	operating under Chapter 842;

under Chapter 885;

under Chapter 843;

under Chapter 884; [<del>or</del>]

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(3) [(iii)] a fraternal benefit society operating

(4) [(iv)] a stipulated premium company operating

(5) [(v)] a health maintenance organization operating

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1	(6) an approved nonprofit health corporation that
2	holds a certificate of authority under Chapter 844;
3	(7) a multiple employer welfare arrangement that holds
4	a certificate of authority under Chapter 846;
5	(8) a Lloyd's plan operating under Chapter 941; or
6	(9) an exchange operating under Chapter 942.
7	(b) Notwithstanding any other law, this chapter applies to
8	[ <del>and</del>
9	[ <del>(B) to the extent permitted by the Employee</del>
10	Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et
11	seq.), a health benefit plan that is offered by:
12	[(i) a multiple employer welfare
13	arrangement as defined by Section 3 of that Act; or
14	[(ii) another analogous benefit
15	arrangement;
16	[ <del>(2) is offered by</del> ]:
17	(1) a small employer health benefit plan subject to
18	Chapter 1501, including coverage provided through a health group
19	cooperative under Subchapter B of that chapter;
20	(2) a standard health benefit plan issued under
21	<u>Chapter 1507;</u>
22	(3) a basic coverage plan under Chapter 1551;
23	(4) a basic plan under Chapter 1575;
24	(5) a primary care coverage plan under Chapter 1579;
25	(6) a plan providing basic coverage under Chapter
26	<u>1601;</u>
27	(7) group health coverage made available by a school

district in accordance with Section 22.004, Education Code; 1 2 (8) the state Medicaid program, including the Medicaid 3 managed care program operated under Chapter 540, Government Code; 4 (9) the child health plan program under Chapter 62, 5 Health and Safety Code; 6 (10) a regional or local health care program operated 7 under Section 75.104, Health and Safety Code; 8 (11) a self-funded health benefit plan sponsored by a professional employer organization under Chapter 91, Labor Code; 9 10 and (12) a health benefit plan offered by [(A) an approved 11 12 nonprofit health corporation that holds a certificate of authority under Chapter 844; or 13 14 an entity not authorized under this code or 15 another insurance law of this state that contracts directly for health care services on a risk-sharing basis, including a 16 17 capitation basis[; or [(3) provides health and accident coverage through a 18 risk pool created under Chapter 172, Local Government Code, 19 notwithstanding Section 172.014, Local Government Code, or any 20 21 other law]. SECTION 2. Section 1362.002, Insurance Code, is amended to 22 read as follows: 23 24 Sec. 1362.002. EXCEPTION. This chapter does not apply to: 25 a health benefit plan that provides coverage:

(A) only for a specified disease or for another

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limited benefit;

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1
                     (B)
                         only for accidental death or dismemberment;
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                     (C)
                         for wages or payments in lieu of wages for a
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   period during which an employee is absent from work because of
    sickness or injury;
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5
                          as a supplement to a liability insurance
                     (D)
   policy; or
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                          only for indemnity for hospital confinement;
                     (E)
8
                    [a small employer health benefit plan written
   under Chapter 1501;
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               [\frac{3}{3}] a Medicare supplemental policy as defined by
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   Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss);
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               (3) [<del>(4)</del>] a workers' compensation insurance policy;
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               (4) [(5)] medical payment insurance coverage provided
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   under a motor vehicle insurance policy; or
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               (5) [(6)] a
                               long-term
                                         care
                                                  insurance
                                                               policy,
    including a nursing home fixed indemnity policy, unless the
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   commissioner determines that the policy provides benefit coverage
    so comprehensive that the policy is a health benefit plan as
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    described by Section 1362.001.
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          SECTION 3. Section 1362.003, Insurance Code, is amended by
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   adding Subsection (c) to read as follows:
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          (c) A health benefit plan that provides coverage under this
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    section may not charge any premium, copayment, coinsurance,
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    deductible, or any other form of cost sharing for a covered benefit
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SECTION 4. Section 1575.159, Insurance Code, is repealed.

SECTION 5. If before implementing any provision of this Act

described by this section.

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- 1 a state agency determines that a waiver or authorization from a
- 2 federal agency is necessary for implementation of that provision,
- 3 the agency affected by the provision shall request the waiver or
- 4 authorization and may delay implementing that provision until the
- 5 waiver or authorization is granted.
- 6 SECTION 6. The changes in law made by this Act apply only to
- 7 a health benefit plan delivered, issued for delivery, or renewed on
- 8 or after January 1, 2026. A health benefit plan delivered, issued
- 9 for delivery, or renewed before January 1, 2026, is governed by the
- 10 law as it existed immediately before the effective date of this Act,
- 11 and that law is continued in effect for that purpose.
- 12 SECTION 7. This Act takes effect September 1, 2025.