

By: Heflin

H.B. No. 3456

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plans under the Texas Employees Group Benefits Act.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 1551.105, Insurance Code, as effective June 1, 2003, is amended to read as follows:

Sec. 1551.105. DATE ~~[AUTOMATIC]~~ COVERAGE BEGINS. (a) For an annuitant, automatic ~~[Automatic]~~ coverage under this subchapter begins on the date ~~the [an employee or]~~ annuitant becomes eligible for coverage.

(b) For an employee, automatic coverage and all other coverages under this chapter begin on the 90th day after the date on which the employee begins employment.

SECTION 2. Subchapter E, Chapter 1551, Insurance Code, as effective June 1, 2003, is amended by adding Section 1551.218 to read as follows:

Sec. 1551.218. COPAYMENTS. A health benefit plan provided under this chapter must require a copayment of not less than:

(1) \$20 for a visit to a primary care physician;

(2) \$25 for a visit to a nonprimary care specialist under a plan operated in the same manner as a health maintenance organization health care plan; and

(3) \$30 for a visit to a nonprimary care specialist under a plan operated in the same manner as a preferred provider

1 benefit plan.

2 SECTION 3. This Act takes effect September 1, 2003, and
3 applies to health benefit plans provided under Chapter 1551,
4 Insurance Code, as effective June 1, 2003, beginning with the
5 2004-2005 state fiscal year.