

BILL ANALYSIS

H.B. 1485
By: Thompson
Insurance
Committee Report (Amended)

BACKGROUND AND PURPOSE

Human papillomavirus (HPV) is one of the world's leading sexually transmitted diseases. HPV consist of as many as 100 different strains that cause a number of conditions. 13 of those strains are considered to be "high risk" and are associated with the development of precancerous abnormal cells. These precancerous cells may progress in females to become cervical cancer if left undetected and untreated.

Cervical cancer occurs in the lower, more narrow area of a woman's uterus. The presence of precancerous abnormal cells may be detected by a Pap smear test or pelvic exam. According to a study done by the Women in Government: HPV & Cervical Caner Policy Resource Center, Texas's mortality rate due to cervical cancer is 30 percent higher than the national rate.

The purpose of HB 1485 is to provide those who are insured the health benefit plan coverage for screening tests for human papillomavirus (HPV) and cervical cancer

RULEMAKING AUTHORITY

Rulemaking authority is granted to the Commissioner of Insurance to establish rules for notice of coverage in Insurance Code Sec. 1370.004(b) in SECTION 1 of this bill.

ANALYSIS

SECTION 1. This bill adds Chapter 1370 to the Insurance Code, as effective April 1, 2005.

Sec. 1370.001. Describes the providers to whom this chapter applies.

Sec. 1370.002. Describes the exceptions to this chapter.

Sec. 1370.003. Requires that a health benefit plan that provides coverage for diagnostic medical procedures provide each woman 18 years or older and enrolled with a basic Pap smear screening. Sets out guidelines.

Sec. 1370.004. Requires that a plan issuer provide women 18 years of age and older enrolled in the plan written notice of the coverage required under this chapter.

SECTION 2. Updates new provisions of the Insurance Code for group health insurance. Adds to those not exempted out under consumer choice plan and amends the list of coverage that have to be provided under a consumer choice plan to coverage for cervical caner under Chapter 1370.

SECTION 3. Updates new provisions of the Insurance Code for health maintenance organizations. Adds to those not exempted out under consumer choice plan and amends the list of coverage that have to be provided under a consumer choice plan the coverage for cervical cancer under Chapter 1370.

SECTION 4. Prospective application.

SECTION 5. This Act will prevail over another Act of the 79th legislature, relating to the General Code Update Bill.

EFFECTIVE DATE

September 1, 2005. The Act applies beginning with January 1, 2006.

EXPLANATION OF AMENDMENTS

Amendment 1 adds "a limited health benefit policy that does not provide coverage for physical examinations or wellness exams" to the list of exceptions in section 1370.002.