BILL ANALYSIS

H.B. 1600 By: Thompson Insurance Committee Report (Unamended)

BACKGROUND AND PURPOSE

Hemophilia is a bleeding disorder that is inherited from the parents and is more prevalent in males than females. This disorder is characterized by the inability of blood to clot or coagulate due to the low levels or lack of the clotting factor protein. A person with hemophilia may bleed for an extended amount of time or bleed internally after an injury or accident. This could lead to further harm to the person and possible result in permanent damage or death.

Hemophilia is a chronic disease, when raising someone with hemophilia or living with hemophilia it affects all aspects of ones life, from running to brushing ones teeth. There is no cure for hemophilia, but there are many medical treatments that have helped people with hemophilia to live a normal life span. According to the Nation Hemophilia Foundation, annually the health care cost for a child living with hemophilia surpasses \$100,000. This cost can only increase as the child grows and becomes an adult. These high costs make it necessary to examine the health benefit plans concerning maximum lifetime benefit limits for hemophiliacs.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rule making authority to a state officer, department, agency, or institution.

ANALYSIS

H.B. 1600 relates to a study concerning maximum lifetime benefit limits under health benefit plan coverage applicable to hemophilia-related services, supplies, pharmaceuticals, and biologics.

The first section defines "department" to mean the Texas Department of Insurance. The next section discusses the study and states that the department shall conduct a study of the maximum lifetime benefits limits under health benefit plan coverage as those limits are applied to hemophilia-related services, supplies, pharmaceuticals, and biologics. Also, the department shall consult health benefit plan issuers, physicians, organizations representing the interest of individuals with hemophilia, and the office of public insurance counsel. Finally, the study must consider the manner in which hemophilia-related services, supplies, pharmaceuticals, and biologics are provided by the Texas Health Insurance Risk Pool.

Further, the bill states that the results of the study conducted under this Act shall be reported to the governor, the lieutenant governor, and the speaker of the house of representatives no later than September 1, 2008. The report must include the estimated cost for an enrollee providing coverage for hemophilia-related services, supplies, pharmaceuticals, and biologics without a maximum lifetime benefit limit or with an increased maximum lifetime benefit limit and a review of the benefits to enrollees of providing coverage for hemophilia-related services, supplies, pharmaceuticals, and biologics without a maximum lifetime benefit limit or with an increased maximum lifetime benefit limit and the recommendations of the commissioner of insurance, if any, for legislation concerning the maximum lifetime benefit limits under health benefit plan coverage as those limits are applied to hemophilia-related services, supplies, pharmaceuticals, and biologics. The expiration date of this Act is June 1, 2009.

EFFECTIVE DATE

September 1, 2007

H.B. 1600 80(R)