

By: Ortiz, Jr.

H.B. No. 1957

A BILL TO BE ENTITLED

AN ACT

relating to benefits under certain health benefit plans for prenatal care, birth of a child, and postdelivery care.

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

SECTION 1. The heading of Subchapter B, Chapter 1366, Insurance Code, is amended to read as follows:

SUBCHAPTER B. BENEFITS FOR PRENATAL CARE, [~~MINIMUM INPATIENT STAY FOLLOWING~~] BIRTH OF CHILD, AND POSTDELIVERY CARE

SECTION 2. Section 1366.053, Insurance Code, is amended to read as follows:

Sec. 1366.053. APPLICABILITY OF SUBCHAPTER. (a) This subchapter applies only to a health benefit plan that:

(1) provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including:

(A) an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of coverage that is offered by:

(i) an insurance company;

(ii) a group hospital service corporation operating under Chapter 842;

(iii) a fraternal benefit society operating under Chapter 885;

1 (iv) a stipulated premium company operating
2 under Chapter 884; or

3 (v) a health maintenance organization
4 operating under Chapter 843; and

5 (B) to the extent permitted by the Employee
6 Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et
7 seq.), a health benefit plan that is offered by:

8 (i) a multiple employer welfare arrangement
9 as defined by Section 3 of that Act;

10 (ii) an entity not authorized under this
11 code or another insurance law of this state that contracts directly
12 for health care services on a risk-sharing basis, including a
13 capitation basis; or

14 (iii) another analogous benefit
15 arrangement; or

16 (2) is offered by an approved nonprofit health
17 corporation that holds a certificate of authority under Chapter
18 844.

19 (b) This subchapter applies to group health coverage made
20 available by a school district in accordance with Section 22.004,
21 Education Code.

22 (c) Notwithstanding Section 172.014, Local Government Code,
23 or any other law, this subchapter applies to health and accident
24 coverage provided by a risk pool created under Chapter 172, Local
25 Government Code.

26 (d) Notwithstanding any provision in Chapter 1551, 1575,
27 1579, or 1601 or any other law, this subchapter applies to:

- 1 (1) a basic coverage plan under Chapter 1551;
- 2 (2) a basic plan under Chapter 1575;
- 3 (3) a primary care coverage plan under Chapter 1579;
- 4 and
- 5 (4) basic coverage under Chapter 1601.

6 (e) Notwithstanding any other law, a standard health
7 benefit plan provided under Chapter 1507 must provide the coverage
8 required by this subchapter.

9 (f) Notwithstanding Section 1451.253, Section 1501.251, or
10 any other law, this subchapter applies to coverage under a small
11 employer health benefit plan subject to Chapter 1501.

12 SECTION 3. Subchapter B, Chapter 1366, Insurance Code, is
13 amended by adding Sections 1366.0545, 1366.0546, and 1366.0547 to
14 read as follows:

15 Sec. 1366.0545. COVERAGE FOR PRENATAL CARE REQUIRED. A
16 health benefit plan must provide to a pregnant enrollee benefits
17 for prenatal care recommended under generally accepted standards of
18 medical practice or that is medically necessary for the enrollee.

19 Sec. 1366.0546. COVERAGE FOR BIRTH OF CHILD REQUIRED. A
20 health benefit plan must provide coverage to an enrollee who is a
21 woman for medical and other health care services provided to the
22 enrollee and the enrollee's child in connection with the birth of
23 the child.

24 Sec. 1366.0547. ACCESS TO OBSTETRICAL OR GYNECOLOGICAL
25 CARE. Except as otherwise provided by this subchapter, coverage
26 under Sections 1366.0545 and 1366.0546 is subject to Subchapter F,
27 Chapter 1451.

1 SECTION 4. Section 1366.055(a), Insurance Code, is amended
2 to read as follows:

3 (a) Except as provided by Subsection (b), a health benefit
4 plan [~~that provides maternity benefits, including benefits for~~
5 ~~childbirth,~~] must provide to a woman who has given birth to a child
6 and the newborn child coverage for inpatient care in a health care
7 facility for not less than:

8 (1) 48 hours after an uncomplicated vaginal delivery;
9 and

10 (2) 96 hours after an uncomplicated delivery by
11 cesarean section.

12 SECTION 5. Section 1366.059, Insurance Code, is amended to
13 read as follows:

14 Sec. 1366.059. RULES. The commissioner, in accordance
15 with Subchapter A, Chapter 36, shall adopt rules necessary to
16 administer this subchapter. The rules may coordinate benefits
17 required under this subchapter with analogous benefits required
18 under federal law.

19 SECTION 6. This Act applies only to a health benefit plan
20 that is delivered, issued for delivery, or renewed on or after
21 January 1, 2008. A health benefit plan that is delivered, issued for
22 delivery, or renewed before January 1, 2008, is governed by the law
23 as it existed immediately before the effective date of this Act, and
24 that law is continued in effect for this purpose.

25 SECTION 7. This Act takes effect September 1, 2007.