

By: Parker

H.B. No. 2116

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for home defibrillators.

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

SECTION 1. Subtitle E, Title 8, Insurance Code, is amended by adding Chapter 1372 to read as follows:

CHAPTER 1372. COVERAGE FOR HOME DEFIBRILLATORS

Sec. 1372.001. DEFINITION. In this chapter, "enrollee" means an individual entitled to coverage under a health benefit plan.

Sec. 1372.002. APPLICABILITY OF CHAPTER. (a) This chapter applies only to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage provided by a health group cooperative under Subchapter B of that chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of coverage or similar coverage document that is offered by:

(1) an insurance company;

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

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

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

3           (5) a reciprocal exchange operating under Chapter 942;

4           (6) a Lloyd's plan operating under Chapter 941;

5           (7) a health maintenance organization operating under  
6 Chapter 843;

7           (8) a multiple employer welfare arrangement that holds  
8 a certificate of authority under Chapter 846; or

9           (9) an approved nonprofit health corporation that  
10 holds a certificate of authority under Chapter 844.

11           (b) Notwithstanding Section 172.014, Local Government Code,  
12 or any other law, this chapter applies to health and accident  
13 coverage provided by a risk pool created under Chapter 172, Local  
14 Government Code.

15           (c) Notwithstanding any provision in Chapter 1551, 1575,  
16 1579, or 1601 or any other law, this chapter applies to:

17           (1) a basic coverage plan under Chapter 1551;

18           (2) a basic plan under Chapter 1575;

19           (3) a primary care coverage plan under Chapter 1579;

20 and

21           (4) basic coverage under Chapter 1601.

22           (d) Notwithstanding any other law, a standard health  
23 benefit plan provided under Chapter 1507 must provide the coverage  
24 required by this chapter.

25           Sec. 1372.003. REQUIRED COVERAGE FOR HOME DEFIBRILLATOR.

26           (a) A health benefit plan must provide coverage for a home  
27 defibrillator to an enrollee who:

1           (1) has a medically documented heart illness,  
2 including a previous heart attack; and

3           (2) resides 20 miles or more from the nearest  
4 hospital, clinic, or other medical facility with the ability to  
5 treat a patient in cardiac arrest.

6           (b) Covered benefits under this chapter are limited to the  
7 most appropriate model of home defibrillator that adequately meets  
8 the medical needs of the enrollee as determined by the enrollee's  
9 treating physician.

10          (c) Subject to applicable copayments and deductibles, the  
11 repair and replacement of a home defibrillator is a covered benefit  
12 under this chapter unless the repair or replacement is necessitated  
13 by misuse or loss by the enrollee.

14          (d) Coverage required under this section:

15           (1) may be subject to annual deductibles, copayments,  
16 and coinsurance that are consistent with annual deductibles,  
17 copayments, and coinsurance required for other coverage under the  
18 health benefit plan; and

19           (2) may not be subject to annual dollar limits.

20          Sec. 1372.004. PREAUTHORIZATION. A health benefit plan may  
21 require prior authorization for a home defibrillator in the same  
22 manner that the health benefit plan requires prior authorization  
23 for any other covered benefit.

24          Sec. 1372.005. MANAGED CARE PLAN. A health benefit plan  
25 issuer may require that, if coverage is provided through a managed  
26 care plan, the benefits mandated under this chapter are covered  
27 benefits only if the home defibrillator is provided by a vendor, and

1 related services are rendered by a health care provider, that  
2 contracts with or is designated by the health benefit plan issuer.  
3 If the health benefit plan issuer provides in-network and  
4 out-of-network services, the coverage for a home defibrillator  
5 provided through out-of-network services must be comparable to that  
6 provided through in-network services.

7 SECTION 2. Chapter 1372, Insurance Code, as added by this  
8 Act, applies only to a health benefit plan that is delivered,  
9 issued for delivery, or renewed on or after January 1, 2008. A  
10 health benefit plan that is delivered, issued for delivery, or  
11 renewed before January 1, 2008, is covered by the law in effect at  
12 the time the plan was delivered, issued for delivery, or renewed,  
13 and that law is continued in effect for that purpose.

14 SECTION 3. This Act takes effect September 1, 2007.