

By: Lucio

S.B. No. 725

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for certain tests for the early detection of cardiovascular disease.

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

SECTION 1. Subtitle E, Title 8, Insurance Code, is amended by adding Chapter 1376 to read as follows:

CHAPTER 1376. CERTAIN TESTS FOR EARLY DETECTION OF CARDIOVASCULAR DISEASE

Sec. 1376.001 APPLICABILITY OF CHAPTER. (a) This chapter 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;

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

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

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

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; or

10 (ii) another analogous benefit
11 arrangement;

12 (C) a small employer health benefit plan written
13 under Chapter 1501;

14 (D) a standard health benefit plan issued under
15 Chapter 1507; or

16 (E) a Medicare supplemental policy as defined by
17 Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss);

18 (2) is offered by an approved nonprofit health
19 corporation operating under Chapter 844; or

20 (3) provides health and accident coverage through a
21 risk pool created under Chapter 172, Local Government Code,
22 notwithstanding Section 172.014, Local Government Code.

23 (b) Notwithstanding any provision in Chapter 1551, 1575,
24 1579, or 1601 or any other law, this chapter applies to:

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

26 (2) a basic plan under Chapter 1575;

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

1 and

2 (4) basic coverage under Chapter 1601.

3 Sec. 1376.002. EXCEPTION. This chapter does not apply to:

4 (1) a plan that provides coverage:

5 (A) only for a specified disease or other limited
6 benefit;

7 (B) only for accidental death or dismemberment;

8 (C) for wages or payments in lieu of wages for a
9 period during which an employee is absent from work because of
10 sickness or injury;

11 (D) as a supplement to a liability insurance
12 policy; or

13 (E) only for indemnity for hospital confinement;

14 (2) a workers' compensation insurance policy;

15 (3) medical payment insurance coverage provided under
16 a motor vehicle insurance policy; or

17 (4) a long-term care policy, including a nursing home
18 fixed indemnity policy, unless the commissioner determines that the
19 policy provides benefit coverage so comprehensive that the policy
20 is a health benefit plan as described by Section 1376.001.

21 Sec. 1376.003. MINIMUM COVERAGE REQUIRED. (a) A health
22 benefit plan that provides coverage for screening medical
23 procedures must provide the minimum coverage required by this
24 section to each covered individual:

25 (1) who is:

26 (A) a male older than 45 years of age and younger
27 than 76 years of age; or

1 (B) a female older than 55 years of age and
2 younger than 76 years of age; and

3 (2) who:

4 (A) is diabetic; or

5 (B) has a risk of developing coronary heart
6 disease, based on a score derived using the Framingham Heart Study
7 coronary prediction algorithm, that is intermediate or higher.

8 (b) The minimum coverage required to be provided under this
9 section is coverage of up to \$200 for one of the following
10 noninvasive screening tests for atherosclerosis and abnormal
11 artery structure and function every five years, performed by a
12 laboratory that is certified by a national organization recognized
13 by the commissioner by rule for the purposes of this section:

14 (1) computed tomography (CT) scanning measuring
15 coronary artery calcification; or

16 (2) ultrasonography measuring carotid intima-media
17 thickness and plaque.

18 SECTION 2. The change in law made by this Act applies only
19 to a health benefit plan delivered, issued for delivery, or renewed
20 on or after January 1, 2008. A health benefit plan delivered,
21 issued for delivery, or renewed before January 1, 2008, is governed
22 by the law in effect immediately before the effective date of this
23 Act, and that law is continued in effect for that purpose.

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