

AN ACT

relating to health benefit plan coverage for autism spectrum disorder.

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

SECTION 1. Section 1355.002, Insurance Code, is amended to read as follows:

Sec. 1355.002. APPLICABILITY OF SUBCHAPTER. (a) This subchapter applies only to a group health benefit plan that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including:

(1) a group insurance policy, group insurance agreement, group hospital service contract, or group evidence of coverage that is offered by:

(A) an insurance company;

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

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

(D) a stipulated premium company operating under Chapter 884; or

(E) a health maintenance organization operating under Chapter 843; and

(2) to the extent permitted by the Employee Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et seq.), a plan

1 offered under:

2 (A) a multiple employer welfare arrangement as
3 defined by Section 3 of that Act; or

4 (B) another analogous benefit arrangement.

5 (b) Notwithstanding any provision in Chapter 1575 or 1579 or
6 any other law, Section 1355.015 applies to:

7 (1) a basic plan under Chapter 1575; and

8 (2) a primary care coverage plan under Chapter 1579.

9 SECTION 2. Section 1355.015(a), Insurance Code, is amended
10 to read as follows:

11 (a) At a minimum, a health benefit plan must provide
12 coverage as provided by this section to an enrollee [~~older than two~~
13 ~~years of age and younger than six years of age~~] who is diagnosed
14 with autism spectrum disorder from the date of diagnosis until the
15 enrollee completes nine years of age. If an enrollee who is being
16 treated for autism spectrum disorder becomes 10 [~~six~~] years of age
17 or older and continues to need treatment, this subsection does not
18 preclude coverage of treatment and services described by Subsection
19 (b).

20 SECTION 3. This Act applies only to a health benefit plan
21 delivered, issued for delivery, or renewed on or after January 1,
22 2010. A health benefit plan delivered, issued for delivery, or
23 renewed before January 1, 2010, is governed by the law as it existed
24 immediately before the effective date of this Act, and that law is
25 continued in effect for that purpose.

26 SECTION 4. This Act takes effect September 1, 2009.

President of the Senate

Speaker of the House

I certify that H.B. No. 451 was passed by the House on May 15, 2009, by the following vote: Yeas 144, Nays 0, 1 present, not voting; that the House refused to concur in Senate amendments to H.B. No. 451 on May 29, 2009, and requested the appointment of a conference committee to consider the differences between the two houses; and that the House adopted the conference committee report on H.B. No. 451 on May 31, 2009, by the following vote: Yeas 122, Nays 20, 1 present, not voting.

Chief Clerk of the House

H.B. No. 451

I certify that H.B. No. 451 was passed by the Senate, with amendments, on May 25, 2009, by the following vote: Yeas 30, Nays 1; at the request of the House, the Senate appointed a conference committee to consider the differences between the two houses; and that the Senate adopted the conference committee report on H.B. No. 451 on May 31, 2009, by the following vote: Yeas 30, Nays 1.

Secretary of the Senate

APPROVED: _____

Date

Governor