

By: Farrar

H.B. No. 678

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for reconstructive surgery following mastectomy.

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

SECTION 1. Section 1357.002, Insurance Code, is amended to read as follows:

Sec. 1357.002. APPLICABILITY OF SUBCHAPTER. (a) This subchapter applies only to a health benefit plan 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;
- (4) a stipulated premium company operating under Chapter 884;
- (5) a reciprocal exchange operating under Chapter 942;
- (6) a health maintenance organization operating under Chapter 843;

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

3 (8) an approved nonprofit health corporation that
4 holds a certificate of authority under Chapter 844.

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

8 SECTION 2. The change in law made by this Act applies only
9 to a health benefit plan that is delivered, issued for delivery, or
10 renewed on or after January 1, 2010. A health benefit plan that is
11 delivered, issued for delivery, or renewed before January 1, 2010,
12 is covered by the law in effect at the time the health benefit plan
13 was delivered, issued for delivery, or renewed, and that law is
14 continued in effect for that purpose.

15 SECTION 3. This Act takes effect September 1, 2009.