LEGISLATIVE BUDGET BOARD Austin, Texas

FISCAL NOTE, 83RD LEGISLATIVE REGULAR SESSION

May 2, 2013

TO: Honorable John T. Smithee, Chair, House Committee on Insurance

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB2929 by Sheets (Relating to health benefit plan coverage for brain injury.), Committee

Report 1st House, Substituted

No significant fiscal implication to the State is anticipated.

The bill would amend the Insurance Code relating to health benefit plan coverage for brain injury. The bill would prohibit a health benefit plan from limiting the number of days of treatment under a health benefit plan that does not specifically identify a particular therapy, treatment, testing, remediation, or other service. The bill would prohibit a health benefit plan from limiting the number of days covered for post-acute care. The bill would prohibit a health benefit plan from refusing to contract with a facility to provide certain services solely because the facility is an assisted living facility.

Based on information provided by TDI, the bill would result in an increase in form filings due to Health Maintenance Organizations and health insurers filing amendments to policies, certificates, and evidence of coverage; however, it is assumed that all duties and responsibilities associated with implementing the provisions of the bill could be accomplished by utilizing existing staff and resources. Also, based on information provided by TDI, this analysis assumes that implementation of the bill would result in an increase in form filings and a one-time revenue gain (\$70,500 in fiscal year 2014) in General Revenue-Dedicated Texas Department of Insurance Fund 36. Since General Revenue-Dedicated Texas Department of Insurance Fund 36 is a self-leveling account, this analysis also assumes that any additional revenue resulting from the implementation of the bill would accumulate in account fund balances and that the department would adjust the assessment of the maintenance tax or other fees accordingly in the following year.

ERS, TRS and UT System all indicate that the costs associated with providing post-acute care for an unlimited number of days would not be significant.

The conditions of the bill would only apply to health benefit plans delivered, issued for delivery, or renewed on or after January 1, 2014. The bill would take effect on September 1, 2013.

Local Government Impact

No significant fiscal implication to units of local government is anticipated.

Source Agencies: 323 Teacher Retirement System, 327 Employees Retirement System, 454

Department of Insurance, 720 The University of Texas System

Administration, 701 Central Education Agency

LBB Staff: UP, ER, JW, AG, EP, EMo, LXH