By: Anderson of Dallas, Isaac, Howard,<br/>FarneyH.B. No. 2979Substitute the following for H.B. No. 2979:By: VoC.S.H.B. No. 2979

## A BILL TO BE ENTITLED

1 AN ACT 2 relating to health benefit plan coverage of hearing aids for certain individuals. 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS: 4 SECTION 1. Chapter 1367, Insurance Code, is amended by 5 adding Subchapter F to read as follows: 6 7 SUBCHAPTER F. HEARING AIDS Sec. 1367.251. APPLICABILITY OF SUBCHAPTER. (a) This 8 9 subchapter applies only to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage 10 provided by a health group cooperative under Subchapter B of that 11 12 chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, 13 14 including an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, 15 16 or an individual or group evidence of coverage or similar coverage document that is offered by: 17 18 (1) an insurance company; 19 (2) a group hospital service corporation operating under Chapter 842; 20 21 (3) a fraternal benefit society operating under Chapter 885; 22 23 (4) a Lloyd's plan operating under Chapter 941; 24 (5) a stipulated premium insurance company operating

1

C.S.H.B. No. 2979

1	under Chapter 884;
2	(6) a reciprocal exchange operating under Chapter 942;
3	(7) a health maintenance organization operating under
4	Chapter 843;
5	(8) a multiple employer welfare arrangement that holds
6	a certificate of authority under Chapter 846; or
7	(9) an approved nonprofit health corporation that
8	holds a certificate of authority under Chapter 844.
9	(b) This subchapter applies to coverage under a group health
10	benefit plan described by Subsection (a) provided to a resident of
11	this state, regardless of whether the group policy or contract is
12	delivered, issued for delivery, or renewed within or outside this
13	state.
14	(c) This subchapter applies to group health coverage made
15	available by a school district in accordance with Section 22.004,
16	Education Code.
17	(d) This subchapter applies to a self-funded health benefit
18	plan sponsored by a professional employer organization under
19	Chapter 91, Labor Code.
20	(e) Notwithstanding Section 22.409, Business Organizations
21	Code, or any other law, this subchapter applies to a church benefits
22	board established under Chapter 22, Business Organizations Code.
23	(f) Notwithstanding Section 157.008, Local Government Code,
24	or any other law, this subchapter applies to a county employee
25	health benefit plan established under Chapter 157, Local Government
26	Code.
27	(g) Notwithstanding Section 75,104, Health and Safety Code,

	C.S.H.B. No. 2979
1	or any other law, this subchapter applies to a regional or local
2	health care program established under Chapter 75, Health and Safety
3	<u>Code.</u>
4	(h) Notwithstanding any provision in Chapter 1551, 1575,
5	1579, or 1601 or any other law, this subchapter applies to:
6	(1) a basic coverage plan under Chapter 1551;
7	(2) a basic plan under Chapter 1575;
8	(3) a primary care coverage plan under Chapter 1579;
9	and
10	(4) basic coverage under Chapter 1601.
11	(i) Notwithstanding any other law, a standard health
12	benefit plan provided under Chapter 1507 must provide the coverage
13	required by this subchapter.
14	Sec. 1367.252. EXCEPTION. This subchapter does not apply
15	to:
16	(1) a plan that provides coverage:
17	(A) for wages or payments in lieu of wages for a
18	period during which an employee is absent from work because of
19	sickness or injury;
20	(B) as a supplement to a liability insurance
21	policy;
22	(C) for credit insurance;
23	(D) only for dental or vision care;
24	(E) only for hospital expenses; or
25	(F) only for indemnity for hospital confinement;
26	(2) a Medicare supplemental policy as defined by
27	<pre>Section 1882(g)(1), Social Security Act (42 U.S.C. Section 1395ss);</pre>

1 (3) a workers' compensation insurance policy; 2 (4) medical payment insurance coverage provided under 3 a motor vehicle insurance policy; 4 (5) a long-term care policy, including a nursing home 5 fixed indemnity policy, unless the commissioner determines that the policy provides benefit coverage so comprehensive that the policy 6 7 is a health benefit plan as described by Section 1367.251; 8 (6) a Medicaid managed care program operated under Chapter 533, Government Code; or 9 10 (7) a Medicaid program operated under Chapter 32, Human Resources Code. 11 Sec. 1367.253. COVERAGE REQUIRED. (a) A health benefit 12 plan must provide coverage for the cost of a medically necessary 13 14 hearing aid and related services and supplies for a covered 15 individual who is 18 years of age or younger. 16 (b) Coverage required under this section is limited to one 17 hearing aid in each ear every three years. 18 (c) Except as provided by Subsection (b), coverage required 19 under this section: 20 (1) may not be less favorable than coverage for physical illness generally under the plan; and 21 22 (2) must be subject to durational limits and coinsurance factors no less favorable than coverage provided for 23 24 physical illness generally under the plan. 25 (d) This section does not apply to a qualified health plan 26 defined by 45 C.F.R. Section 155.20 if a determination is made under 45 C.F.R. Section 155.170 that: 27

C.S.H.B. No. 2979

	C.S.H.B. No. 2979
1	(1) this subchapter requires the qualified health plan
2	to offer benefits in addition to the essential health benefits
3	required under 42 U.S.C. Section 18022(b); and
4	(2) this state must make payments to defray the cost of
5	the additional benefits mandated by this subchapter.
6	SECTION 2. The change in law made by this Act applies only
7	to a health benefit plan delivered, issued for delivery, or renewed
8	on or after January 1, 2016. A health benefit plan delivered, issued
9	for delivery, or renewed before January 1, 2016, is governed by the
10	law in effect immediately before the effective date of this Act, and
11	that law is continued in effect for that purpose.
12	SECTION 3. This Act takes effect September 1, 2015.