

By: Rodríguez, Zaffirini

S.B. No. 847

A BILL TO BE ENTITLED

AN ACT

relating to prohibiting a waiting period requirement for coverage under the child health plan program.

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

SECTION 1. Section 62.154, Health and Safety Code, is amended to read as follows:

Sec. 62.154. WAITING PERIOD PROHIBITED; CROWD OUT. (a) The ~~[To the extent permitted under Title XXI of the Social Security Act (42 U.S.C. Section 1397aa et seq.), as amended, and any other applicable law or regulations, the]~~ child health plan may not ~~[must]~~ include a waiting period, but the child health plan ~~[and]~~ may include copayments and other provisions intended to discourage:

(1) employers and other persons from electing to discontinue offering coverage for children under employee or other group health benefit plans; and

(2) individuals with access to adequate health benefit plan coverage, other than coverage under the child health plan, from electing not to obtain or to discontinue that coverage for a child.

(b) A child may enroll in the child health plan program at any time, without regard to any open enrollment period established under the enrollment procedures, ~~[is not subject to a waiting period adopted under Subsection (a)]~~ if:

(1) the family lost coverage for the child as a result

1 of:

2 (A) termination of employment because of a layoff
3 or business closing;

4 (B) termination of continuation coverage under
5 the Consolidated Omnibus Budget Reconciliation Act of 1985 (Pub.
6 L. No. 99-272);

7 (C) change in marital status of a parent of the
8 child;

9 (D) termination of the child's Medicaid
10 eligibility because:

11 (i) the child's family's earnings or
12 resources increased; or

13 (ii) the child reached an age at which
14 Medicaid coverage is not available; or

15 (E) a similar circumstance resulting in the
16 involuntary loss of coverage;

17 (2) the family terminated health benefits plan
18 coverage for the child because the cost to the child's family for
19 the coverage exceeded 10 percent of the family's net income;

20 (3) the child has access to group-based health
21 benefits plan coverage and is required to participate in the health
22 insurance premium payment reimbursement program administered by
23 the commission; or

24 (4) the commission has determined that other grounds
25 exist for a good cause exception.

26 ~~[(c) A child described by Subsection (b) may enroll in the~~
27 ~~child health plan program at any time, without regard to any open~~

1 ~~enrollment period established under the enrollment procedures.~~

2 ~~[(d) The waiting period required by Subsection (a) must:~~

3 ~~(1) extend for a period of 90 days after the last~~
4 ~~date on which the applicant was covered under a health benefits~~
5 ~~plan; and~~

6 ~~(2) apply to a child who was covered by a health~~
7 ~~benefits plan at any time during the 90 days before the date of~~
8 ~~application for coverage under the child health plan.]~~

9 SECTION 2. If before implementing any provision of this Act
10 a state agency determines that a waiver or authorization from a
11 federal agency is necessary for implementation of that provision,
12 the agency affected by the provision shall request the waiver or
13 authorization and may delay implementing that provision until the
14 waiver or authorization is granted.

15 SECTION 3. This Act takes effect September 1, 2015.