BILL ANALYSIS

C.S.H.B. 3845 By: Raymond Juvenile Justice & Family Issues Committee Report (Substituted)

BACKGROUND AND PURPOSE

Interested parties contend that state law protecting the rights of insurers to keep certain claims unreported or unidentified under the insurance reporting program operated by the attorney general's office to enforce certain child support obligations is inadequate. C.S.H.B. 3845 seeks to expand the types of claims an insurer is not required to report or identify under the reporting program.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that this bill does not expressly grant any additional rulemaking authority to a state officer, department, agency, or institution.

ANALYSIS

C.S.H.B. 3845 amends the Family Code to include among the claims an insurer may not be required to report or identify under the insurance reporting program operated by the attorney general's office to enforce certain child support obligations a claim for benefits, or a portion of a claim for benefits, assigned to be paid to a funeral service provider or facility for actual funeral expenses owed by the insured that are not otherwise paid or reimbursed; a claim for benefits assigned to be paid to a health care provider or facility for actual medical expenses owed by the insured that are not otherwise paid or reimbursed; and a claim for benefits to be paid under a limited benefit insurance policy that provides coverage for one or more specified diseases or illnesses, dental or vision benefits, or hospital indemnity or other fixed indemnity coverage.

EFFECTIVE DATE

On passage, or, if the bill does not receive the necessary vote, September 1, 2017.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 3845 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Section 231.015(c), Family SECTION 1. Section 231.015(c), Family

85R 27793 17.122.883

Substitute Document Number: 85R 23740

Code, is amended to read as follows:

- (c) An insurer may not be required to report or identify the following types of claims:
- (1) a first-party property damage claim under:
- (A) a personal automobile insurance policy for actual repair, replacement, or loss of use of an insured vehicle; or
- (B) a residential or tenant property insurance policy for actual repair, replacement, or loss of use of an insured dwelling and contents, including additional living expenses actually incurred; [of]
- (2) a third-party property damage claim:
- (A) that will be paid to a vendor or repair facility for the actual repair, replacement, or loss of use of:
- (i) a dwelling, condominium, or other improvements on real property;
- (ii) a vehicle, including a motor vehicle, motorcycle, or recreational vehicle; or
- (iii) other tangible personal property that has sustained actual damage or loss; or
- (B) for the reimbursement to a claimant for payments made by the claimant to a vendor or repair facility for the actual repair, replacement, or loss of use of:
- (i) a dwelling, condominium, or other improvements on real property;
- (ii) a vehicle, including a motor vehicle, motorcycle, or recreational vehicle; or
- (iii) other tangible personal property that has sustained actual damage or loss;
- (3) a claim for benefits assigned to be paid under an insurance policy funding prepaid funeral benefits; or
- (4) a claim for benefits assigned to be paid to a health care provider or facility for actual medical expenses owed by the insured that are not otherwise paid or reimbursed.

SECTION 2. This Act takes effect immediately if it receives a vote of two-thirds of all the members elected to each

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- (2) a third-party property damage claim:
- (A) that will be paid to a vendor or repair facility for the actual repair, replacement, or loss of use of:
- (i) a dwelling, condominium, or other improvements on real property;
- (ii) a vehicle, including a motor vehicle, motorcycle, or recreational vehicle; or
- (iii) other tangible personal property that has sustained actual damage or loss; or
- (B) for the reimbursement to a claimant for payments made by the claimant to a vendor or repair facility for the actual repair, replacement, or loss of use of:
- (i) a dwelling, condominium, or other improvements on real property;
- (ii) a vehicle, including a motor vehicle, motorcycle, or recreational vehicle; or
- (iii) other tangible personal property that has sustained actual damage or loss:
- (3) a claim for benefits, or a portion of a claim for benefits, assigned to be paid to a funeral service provider or facility for actual funeral expenses owed by the insured that are not otherwise paid or reimbursed;
- (4) a claim for benefits assigned to be paid to a health care provider or facility for actual medical expenses owed by the insured that are not otherwise paid or reimbursed; or
- (5) a claim for benefits to be paid under a limited benefit insurance policy that provides:
- (A) coverage for one or more specified diseases or illnesses;
- (B) dental or vision benefits; or
- (C) hospital indemnity or other fixed indemnity coverage.

SECTION 2. Same as introduced version.

17.122.883

house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for immediate effect, this Act takes effect September 1, 2017.

85R 27793 17.122.883