

## **BILL ANALYSIS**

C.S.H.B. 937  
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Committee Report (Substituted)

### **BACKGROUND AND PURPOSE**

There are concerns that limits on coverage for contraceptives under health benefit plans may increase unintended pregnancies. C.S.H.B. 937 seeks to address these concerns by setting out requirements for health benefit plan coverage of prescription contraceptive drugs.

### **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. 937 amends the Insurance Code to require a health benefit plan that provides benefits for a prescription contraceptive drug to provide for an enrollee to obtain up to a 3-month supply of the covered prescription contraceptive drug at one time the first time the enrollee obtains the drug and up to a 12-month supply of the covered prescription contraceptive drug at one time each subsequent time the enrollee obtains the same drug, regardless of whether the enrollee was enrolled in the health benefit plan the first time the enrollee obtained the drug. The bill limits an enrollee to obtaining only one 12-month supply of a covered prescription contraceptive drug during each 12-month period. The bill establishes the applicability of its provisions and requires the child health plan program, the health benefits plan for certain children who are qualified aliens, the state Medicaid program, and a managed care organization that contracts with the Health and Human Services Commission to provide health care services to recipients through a managed care plan, to the extent allowed by federal law, to provide the coverage required by the bill to a recipient. The bill applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2020.

### **EFFECTIVE DATE**

September 1, 2019.

### **COMPARISON OF ORIGINAL AND SUBSTITUTE**

While C.S.H.B. 937 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute changes the maximum quantity of a covered prescription contraceptive drug that

an enrollee may obtain at one time from a 12-month supply to a 3-month supply the first time the enrollee obtains the drug and a 12-month supply each subsequent time the enrollee obtains the same drug, regardless of whether the enrollee was enrolled in the health benefit plan the first time the enrollee obtained the drug.

The substitute includes a provision limiting an enrollee to obtaining only one 12-month supply of the drug during each 12-month period.