

BILL ANALYSIS

C.S.H.B. 2682
By: Collier
Insurance
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Reports indicate that some female patients who undergo medically necessary treatments such as chemotherapy can experience egg damage, infertility, and even premature menopause. C.S.H.B. 2682 seeks to help such women maintain their reproductive options by making fertility preservation services more accessible.

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. 2682 amends the Insurance Code to require a health benefit plan to provide coverage for fertility preservation services to a covered person who will receive a medically necessary treatment, including surgery, chemotherapy, and radiation, that the American Society of Clinical Oncology or the American Society for Reproductive Medicine has established may directly or indirectly cause impaired fertility. The bill requires the covered fertility preservation services to be standard procedures to preserve fertility consistent with established medical practices or professional guidelines published by those societies. The bill establishes, and provides certain exceptions to, the applicability of its provisions. 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. 2682 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 applicability of and exceptions to the bill's provisions by:

- not including certain Medicaid programs or the state child health plan program in the applicability and including those programs instead in the exceptions; and
- not including certain plans, health benefits, coverage, or a regional or local health care

program in the applicability.