

BILL ANALYSIS

S.B. 1852
By: Paxton
Insurance
Committee Report (Unamended)

BACKGROUND AND PURPOSE

It has been suggested that insurers may encounter difficulties in obtaining policyholder signatures on the required disclosure statement concerning coverage under a standard health benefit plan and that collecting and tracking signed authorizations for policy renewals is an administrative burden of questionable value for all parties. S.B. 1852 seeks to address this issue by removing the requirement that signed authorizations be obtained for each policy renewal.

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

S.B. 1852 amends the Insurance Code to remove the requirement that each policyholder on renewal of coverage of a standard health benefit plan and each contract holder on renewal of enrollment in such a plan sign the required written disclosure statement concerning coverage under the plan that is provided by a health carrier or health maintenance organization (HMO) and return the statement to the health carrier or HMO, as applicable.

EFFECTIVE DATE

September 1, 2019.