

By: Leach

H.B. No. 3984

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for scalp cooling for cancer patients.

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

SECTION 1. Subtitle E, Title 8, Insurance Code, is amended by adding Chapter 1380 to read as follows:

CHAPTER 1380. COVERAGE FOR SCALP COOLING SYTEMS, APPLICATIONS AND PROCEDURES FOR CANCER PATIENTS

Sec. 1380.001. DEFINITIONS. In this chapter:

(1) "Enrollee" means an individual entitled to coverage under a health benefit plan.

(2) "Scalp Cooling" means a system, application or procedure cleared for use by the United States Food and Drug Administration with the purpose of reducing hair loss in certain individuals undergoing chemotherapy treatment.

Sec. 1380.002. APPLICABILITY OF CHAPTER. (a) This chapter applies only to a health benefit plan, including a small employer health benefit plan written under Chapter 1501 or coverage provided by a health group cooperative under Subchapter B of that chapter, that provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of coverage or similar coverage

1 document that is offered by:

2 (1) an insurance company;

3 (2) a group hospital service corporation operating
4 under Chapter 842;

5 (3) a fraternal benefit society operating under
6 Chapter 885;

7 (4) a stipulated premium company operating under
8 Chapter 884;

9 (5) a reciprocal exchange operating under Chapter 942;

10 (6) a Lloyd's plan operating under Chapter 941;

11 (7) a health maintenance organization operating under
12 Chapter 843;

13 (8) a multiple employer welfare arrangement that holds
14 a certificate of authority under Chapter 846; or

15 (9) an approved nonprofit health corporation that
16 holds a certificate of authority under Chapter 844.

17 (b) Notwithstanding any provision in Chapter 1551, 1575,
18 1579, or 1601 or any other law, this chapter applies to:

19 (1) a basic coverage plan under Chapter 1551;

20 (2) a basic plan under Chapter 1575;

21 (3) a primary care coverage plan under Chapter 1579;

22 and

23 (4) basic coverage under Chapter 1601.

24 Sec. 1380.003. REQUIRED COVERAGE FOR SCALP COOLING SYSTEMS,
25 APPLICATIONS AND PROCEDURES FOR CERTAIN CANCER PATIENTS. (a) A
26 health benefit plan must provide coverage for:

27 (1) scalp cooling systems, applications and

1 procedures:

2 (a) for an enrollee who is undergoing or has
3 undergone medical treatment for cancer; and

4 (b) determined by the enrollee's treating
5 physician to be appropriate for the enrollee in connection with the
6 side effects of the treatment, if any, described by Paragraph (a).

7 (c) An additional premium may not be charged for
8 the coverage required by Subsection (a).

9 (d) Coverage required under Subsection (a) may be
10 subject to the annual deductibles, copayments, and coinsurance that
11 are consistent with annual deductibles, copayments, and
12 coinsurance for other coverage under the health benefit plan.

13 (b) Coverage required under this section:

14 (1) must be provided in a manner determined to be
15 appropriate in consultation with the treating physician, as
16 applicable, and the enrollee;

17 (2) may be subject to annual deductibles, copayments,
18 and coinsurance that are consistent with annual deductibles,
19 copayments, and coinsurance required for other coverage under the
20 health benefit plan; and

21 (3) may not be subject to annual dollar limits.

22 Sec. 1380.004. PREAUTHORIZATION. A health benefit plan may
23 require prior authorization for a scalp cooling system, application
24 or procedure in the same manner that the health benefit plan
25 requires prior authorization for any other covered benefit.

26 Sec. 1380.005. CONDITIONAL EXCEPTION. This subchapter does
27 not apply to a qualified health plan if a determination is made

1 under 45 C.F.R. Section 155.170 that:

2 (1) this subchapter requires the plan to offer
3 benefits in addition to the essential health benefits required
4 under 42 U.S.C. Section 18022(b); and

5 (2) this state is required to defray the cost of the
6 benefits mandated under this subchapter.

7 SECTION 2. Chapter 1380, Insurance Code, as added by this
8 Act, applies only to a health benefit plan that is delivered, issued
9 for delivery, or renewed on or after January 1, 2010. A health
10 benefit plan that is delivered, issued for delivery, or renewed
11 before January 1, 2010, is covered by the law in effect at the time
12 the plan was delivered, issued for delivery, or renewed, and that
13 law is continued in effect for that purpose.

14 SECTION 3. This Act takes effect September 1, 2019.