By: Schwertner S.B. No. 2284

A BILL TO BE ENTITLED

Τ	AN ACT
2	relating to reimbursement under certain health benefit plans for
3	certain services and procedures performed by pharmacists.
4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:
5	SECTION 1. Subchapter C, Chapter 1451, Insurance Code, is
6	amended by adding Section 1451.1261 to read as follows:
7	Sec. 1451.1261. REIMBURSEMENT FOR CERTAIN SERVICES AND
8	PROCEDURES PERFORMED BY PHARMACISTS. (a) Notwithstanding any
9	other law, in addition to applying to a policy, agreement, or
10	contract described by Section 1451.102, this section applies to any
11	other individual or group health benefit plan that provides
12	benefits described by Section 1451.102, including:
13	(1) a health benefit plan issued by:
14	(A) a group hospital service corporation
15	operating under Chapter 842;
16	(B) a health maintenance organization operating
17	under Chapter 843; or
18	(C) a multiple employer welfare arrangement that
19	holds a certificate of authority under Chapter 846;
20	(2) a small employer health benefit plan subject to
21	<u>Chapter 1501;</u>
22	(3) a standard health benefit plan issued under
23	<pre>Chapter 1507;</pre>
24	(4) health benefits provided by or through a church

```
S.B. No. 2284
```

- 1 benefits board under Subchapter I, Chapter 22, Business
- 2 Organizations Code;
- 3 (5) a regional or local health care program operated
- 4 under Section 75.104, Health and Safety Code;
- 5 (6) a self-funded health benefit plan sponsored by a
- 6 professional employer organization under Chapter 91, Labor Code;
- 7 (7) a county employee health benefit plan established
- 8 under Chapter 157, Local Government Code; and
- 9 (8) health and accident coverage provided by a risk
- 10 pool created under Chapter 172, Local Government Code.
- 11 (b) This section does not apply to:
- 12 (1) a basic coverage plan under Chapter 1551;
- 13 (2) a basic plan under Chapter 1575;
- 14 (3) a primary care coverage plan under Chapter 1579;
- 15 (4) a plan providing basic coverage under Chapter
- 16 1601;
- 17 (5) the state Medicaid program, including the Medicaid
- 18 managed care program operated under Chapter 533, Government Code;
- 19 or
- 20 (6) the child health plan program under Chapter 62,
- 21 Health and Safety Code.
- (c) Notwithstanding Section 1451.102, this section applies
- 23 to coverage under a group health benefit plan provided to a resident
- 24 of this state regardless of whether the group policy, agreement, or
- 25 contract is delivered, issued for delivery, or renewed in this
- 26 state.
- 27 (d) An insurer or other health benefit plan issuer or a

- S.B. No. 2284
- 1 third-party administrator or pharmacy benefit manager of a health
- 2 benefit plan may not deny reimbursement to a pharmacist for the
- 3 provision of a service or procedure within the scope of the
- 4 pharmacist's license that:
- 5 (1) would be covered by the insurance policy or other
- 6 coverage agreement if the service or procedure were provided by:
- 7 (A) a physician;
- 8 <u>(B)</u> an advanced practice nurse; or
- 9 (C) a physician assistant; and
- 10 (2) is performed by the pharmacist in strict
- 11 compliance with laws and rules related to the pharmacist's license.
- 12 SECTION 2. Section 1451.1261, Insurance Code, as added by
- 13 this Act, applies only to a health benefit plan that is delivered,
- 14 issued for delivery, or renewed on or after January 1, 2020. A plan
- 15 delivered, issued for delivery, or renewed before January 1, 2020,
- 16 is governed by the law as it existed immediately before the
- 17 effective date of this Act, and that law is continued in effect for
- 18 that purpose.
- 19 SECTION 3. This Act takes effect September 1, 2019.