87R17470 RDS-F

By:  Leach, Neave, Holland, King of Hemphill, H.B. No. 1588

     et al.

Substitute the following for H.B. No. 1588:

By:  Oliverson C.S.H.B. No. 1588

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for scalp cooling systems, applications, and procedures for certain 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 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 approved by the United States Food and Drug Administration for reducing hair loss in an individual undergoing chemotherapy treatment.

Sec. 1380.002.  APPLICABILITY OF CHAPTER. (a) This chapter applies only to a health benefit plan 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 document that is offered by:

(1)  an insurance company;

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

(3)  a health maintenance organization operating under Chapter 843;

(4)  an approved nonprofit health corporation that holds a certificate of authority under Chapter 844;

(5)  a multiple employer welfare arrangement that holds a certificate of authority under Chapter 846;

(6)  a stipulated premium company operating under Chapter 884;

(7)  a fraternal benefit society operating under Chapter 885;

(8)  a Lloyd's plan operating under Chapter 941; or

(9)  an exchange operating under Chapter 942.

(b)  Notwithstanding any other law, this chapter applies to:

(1)  a small employer health benefit plan subject to Chapter 1501, including coverage provided through a health group cooperative under Subchapter B of that chapter; and

(2)  a standard health benefit plan issued under Chapter 1507.

Sec. 1380.003.  CONDITIONAL EXCEPTION. (a) This chapter does not apply to a qualified health plan if a determination is made under 45 C.F.R. Section 155.170 that:

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

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

(b)  If a determination described by Subsection (a) is made as to a qualified health plan, this chapter does not apply to a non-qualified health plan if the non-qualified health plan is offered in the same market as the qualified health plan.

Sec. 1380.004.  COVERAGE REQUIRED. (a) A health benefit plan must provide coverage for scalp cooling:

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

(2)  that is determined by the enrollee's treating physician to be appropriate for the enrollee in connection with the side effects of the medical treatment for cancer.

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

(c)  Coverage required under Subsection (a):

(1)  must be provided in a manner determined to be appropriate in consultation with the treating physician and the enrollee;

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

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

Sec. 1380.005.  PREAUTHORIZATION. A health benefit plan may require prior authorization for scalp cooling in the same manner that the health benefit plan requires prior authorization for any other health benefit.

SECTION 2.  Chapter 1380, Insurance Code, as added by this Act, applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2022.

SECTION 3.  This Act takes effect September 1, 2021.