87R10088 MEW-D

By:  Hinojosa S.B. No. 1329

A BILL TO BE ENTITLED

AN ACT

relating to health benefit plan coverage for speech therapy services provided through telehealth services.

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

SECTION 1.  Section 1455.002, Insurance Code, is amended to read as follows:

Sec. 1455.002.  APPLICABILITY OF CHAPTER. Except as otherwise provided by this chapter, this [~~This~~] chapter applies only to a health benefit plan that:

(1)  provides benefits for medical or surgical expenses incurred as a result of a health condition, accident, or sickness, including:

(A)  an individual, group, blanket, or franchise insurance policy or insurance agreement, a group hospital service contract, or an individual or group evidence of coverage that is offered by:

(i)  an insurance company;

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

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

(iv)  a stipulated premium company operating under Chapter 884; or

(v)  a health maintenance organization operating under Chapter 843; and

(B)  to the extent permitted by the Employee Retirement Income Security Act of 1974 (29 U.S.C. Section 1001 et seq.), a health benefit plan that is offered by:

(i)  a multiple employer welfare arrangement as defined by Section 3 of that Act; or

(ii)  another analogous benefit arrangement; or

(2)  is offered by an approved nonprofit health corporation that holds a certificate of authority under Chapter 844.

SECTION 2.  Chapter 1455, Insurance Code, is amended by adding Section 1455.0041 to read as follows:

Sec. 1455.0041.  COVERAGE FOR SPEECH THERAPY TELEHEALTH SERVICES. (a) This section applies to a health benefit plan described by Section 1455.002.

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

(1)  a standard health benefit plan issued under Chapter 1507;

(2)  a basic coverage plan under Chapter 1551;

(3)  a basic plan under Chapter 1575;

(4)  a primary care coverage plan under Chapter 1579;

(5)  a plan providing basic coverage under Chapter 1601;

(6)  group health coverage made available by a school district in accordance with Section 22.004, Education Code;

(7)  the state Medicaid program, including the Medicaid managed care program operated under Chapter 533, Government Code; and

(8)  the child health plan program under Chapter 62, Health and Safety Code.

(c)  A health benefit plan that provides coverage for speech therapy services must provide coverage for speech therapy services provided through a telehealth service in the same manner as coverage required under Section 1455.004.

(d)  A health benefit plan must reimburse a preferred or contracted health professional for providing speech therapy services to a covered patient as a telehealth service on the same basis and at least at the same rate that the issuer provides reimbursement to that health professional for speech therapy services in an in-person setting.

SECTION 3.  The change in law made by this Act applies only to a health benefit plan that is delivered, issued for delivery, or renewed on or after January 1, 2022. A health benefit plan that is delivered, issued for delivery, or renewed before January 1, 2022, is governed by the law as it existed immediately before the effective date of this Act, and that law is continued in effect for that purpose.

SECTION 4.  This Act takes effect September 1, 2021.